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OF SOUTHPORT.

REPORT

UPON THE

Health and Sanitary Condition

OF THE

County Borough of Southport

For the Year 1938

*(including the Thirtieth Annual Report of the
School Medical Officer).*

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THE HEALTH COMMITTEE.

THE WORSHIPFUL THE MAYOR
(Councillor W. Geldard, J.P.).

Chairman : Alderman J. G. Wilkinson, J.P.

Vice-Chairman : Councillor J. H. Draycott.

Ald. C. AVELING, O.B.E., J.P.

Coun. R. A. C. GREAVES.

Ald. J. R. BILLINGTON.

Coun. A. HUGHES.

Ald. A. TOMLINSON, J.P.

Coun. Mrs. LEIGH.

Coun. T. BALL, J.P.

Coun. F. W. REDDAWAY.

Coun. H. W. BARBER, J.P.

Coun. C. ROTHWELL.

Coun. Dr. F. H. BETTERIDGE.

Coun. J. F. SCOTT.

Coun. H. J. DREWITT.

Coun. F. SPEAKMAN.

Coun. J. GILROY.

Coun. J. W. S. WILKINSON.

STAFF OF THE PUBLIC HEALTH DEPARTMENT.

Medical Officer of Health, School Medical Officer, Tuberculosis Officer and Medical Officer of Corporation Hospitals .....	.....	.....	.....	.....	.....	W. E. FitzGerald, M.C., M.B., Ch.B., D.P.H., Barrister-at-Law.
Deputy	do.	.....	do.	.....	do.	W. D. Hood, M.B., Ch.B., D.P.H. (Resigned Sept., 1938)
.....	.....	.....	.....	.....	.....	F. E. Crawley, M.D., M.B., Ch.B., D.P.H., (Commenced Nov. 21st, 1938).
Assistant	do.	.....	do.	.....	do.	Bertha M. Butters, M.A., M.B., Ch.B., D.P.H.
DENTAL STAFF—J. H. Highton, L.D.S., W. Martland, L.D.S., R. Sanderson (<i>Dental Mechanic</i>) Miss H. Rimmer and Mrs. Brown (<i>Dental Attendants</i>).						
SANITARY INSPECTORS—K. Aspinwall, a.b., <i>Chief Sanitary Inspector</i> , P. Wright, a.b., S. J. Wilde, a.b., G. Hadley, a.b., D. Wood, a.b., <i>Food Inspector</i> , J. Buckley, a.b., and W. Vickers, a.b.						
CLERICAL STAFF—H. R. Rees, B.A. (Admin.), A.C.I.S., <i>Chief Clerk and Vaccination Officer</i> , Miss A. Topping, Miss K. M. Welsh, Miss M. Broomhead, K. C. Vidler, Miss G. Lloyd and Miss E. E. Askew.						
HEALTH VISITORS—Miss V. M. Willder, a.c.d.e., <i>Chief Health Visitor and Supervisor of Midwives</i> , Miss M. Lewis, c.d.e., Miss E. Palmer, c.d.e., Miss A. Probert, c.d.e., Miss G. M. Shenton, c.d.e., Miss D. Selby, c.d.e., Miss A. Dunn, d.e., Mrs. E. Dearden, Mrs. E. Whelan, c.d.e. and Mrs. Capel, e.						
MIDWIVES—B. Hosker, d., M. Lawrance, d., E. McGill, d., M. Pitman, d.						
Blind Welfare Visitor .....	.....	.....	.....	.....	.....	Miss Skidmore.
Infectious Disease Enquiry Officer .....	.....	.....	.....	.....	.....	W. Rigby.
Ambulance Driver .....	.....	.....	.....	.....	.....	J. Watkinson.
Caretaker, 2, Church Street .....	.....	.....	.....	.....	.....	T. Wright.
Caretaker, Abattoirs .....	.....	.....	.....	.....	.....	H. Jackson.
Baths' Superintendent .....	.....	.....	.....	.....	.....	E. K. Hodson.

NOTES RE QUALIFICATIONS.

- (a) Holds the Sanitary Inspector's Certificate.
- (b) Holds the Meat and Foods Certificate.
- (c) Holds the Health Visitor's Certificate.
- (d) State Certified Midwife.
- (e) State Registered Nurse.

NEW HALL HOSPITAL.

Matron .....	.....	.....	.....	.....	.....	Miss E. Fletcher.
Home Sister .....	.....	.....	.....	.....	.....	Miss R. Robinson.
Night Sister .....	.....	.....	.....	.....	.....	Miss R. E. Stubbs.
Sanatorium Sister .....	.....	.....	.....	.....	.....	Miss A. Daley.

FLEETWOOD ROAD HOSPITAL.

Medical Officer .....	.....	.....	.....	.....	.....	D. K. MacDougall, M.B., Ch.B.
Matron .....	.....	.....	.....	.....	.....	Miss M. McNamee.
Sister .....	.....	.....	.....	.....	.....	Miss S. C. McNally.
Sister .....	.....	.....	.....	.....	.....	Miss B. G. Minor.

V.D. HOSPITAL.

Medical Officer .....	.....	.....	.....	.....	.....	H. Bardsley, M.R.C.S., L.R.C.P.
Sister-in-Charge .....	.....	.....	.....	.....	.....	Miss M. L. J. Foster.

CHRISTIANA HARTLEY MATERNITY HOSPITAL.

Medical Officer .....	.....	.....	.....	.....	.....	N. E. Laurence, M.R.C.S., L.R.C.P., F.R.C.S.(Eng.).
Sister-in-Charge .....	.....	.....	.....	.....	.....	Miss E. Graham.

Consultant Tuberculosis Officer .....	.....	.....	.....	.....	.....	John Hay, M.D., F.R.C.P.
Nose and Throat Specialist .....	.....	.....	.....	.....	.....	C. Yorke, M.D., F.R.C.S.(Eng.).
Hon. Dental Surgeon (New Hall) .....	.....	.....	.....	.....	.....	W. A. Findlay, Junr., L.D.S.
Public Vaccinators .....	.....	.....	.....	.....	.....	R. Haddock, M.A., M.B., Ch.B. and G. G. Rigby, L.M.S., S.A. (Lond.).

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.

SIR, LADIES AND GENTLEMEN,

I have pleasure in submitting my Report for the year 1938. The following points may be specially noted.

The Registrar-General's estimate of the population for the middle of the year 1938 again shows a reduction of 360 persons. The birth-rate is lower, being 10·2 per 1,000 population as compared with 10·6 the previous year. A lower death-rate is recorded resulting in a corrected death rate of 12·83 per 1,000 population.

There has been a low incidence of infectious disease throughout the year, and the death-rate due to Pulmonary Tuberculosis is the lowest yet recorded.

For the first time in my experience it is possible to report that no maternal deaths occurred amongst the Southport mothers, a fact which must give considerable satisfaction.

The Committee's scheme of free immunisation against diphtheria for children of school age and under, has been more successful than was anticipated. It was hoped that during the first twelve months the number immunised might reach 1,000 children, the actual figure is considerably above this.

An account of the work of the Municipal Midwifery Service is given on page 29. This service commenced on October 1st of the previous year. The work done is satisfactory and the service is developing steadily.

This year a departure has been made from the usual custom of issuing separate reports for the Health and School Medical Services, and for the first time the separate sections are combined in one report. It is believed that this arrangement will be of advantage to all concerned.

The records of the various sections of the School Medical Service show that the work of this department has continued satisfactorily. The figures indicate that there has been no falling off in the standard of health and nutrition.

By a more detailed arrangement which has been entered into with the teachers with respect to the times of attendance at the school clinics it would appear that a considerable amount of loss of school attendance is being avoided.

An increase in the number of children attending the dental clinics shows that the work is being appreciated by the parents. At the same time further education of the general public on the importance of sound teeth is required before the full benefits of this service will be evident.

The incidence of infectious disease amongst the school children was particularly low.

I am,

Yours faithfully,

W. E. FITZGERALD,

Medical Officer of Health
and School Medical Officer.

MEDICAL OFFICER OF HEALTH'S ANNUAL REPORT,
1938.

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Part I.

STATISTICAL MEMORANDUM

AND

VITAL STATISTICS.

STATISTICAL MEMORANDUM.

Area of Borough (including Foreshore, 18,333 acres)	9,426 acres
Population (1931 Census)	78,927
Do. (Estimated by the Registrar-General), middle of 1938	78,600
Density of Population	8·34 per acre
Number of inhabited houses, 31st December, 1938	23,037
Rateable Value, 1st April, 1938	£947,990
Sum represented by a Penny Rate	£3,660
Number of births registered	802
Legitimate	749
Illegitimate	53
Nett birth rate (per, 1,000 of the population)	10·2
Average birth rate, preceding ten years	10·6
Number of infant deaths (under one year)	56
Infant Mortality Rate (per 1,000 births)	69·8
Legitimate	65
Illegitimate	132
Average Infantile Mortality Rate, preceding ten years	62
Number of deaths registered	1,215
Crude death rate (per 1,000 of the population)	15·46
Average crude death rate, preceding ten years	14·63
Corrected death rate (per 1,000 of the population)	12·83
Number of deaths from tuberculosis (all forms)	34
Tuberculosis death rate (per 1,000 of the population)	0·43
Average tuberculosis death rate (preceding ten years)	0·576
Number of deaths from Zymotic disease	11
Death rate from Zymotic diseases (per 1,000 of the population).....	0·14
Average death rate from Zymotic diseases (preceding ten years).....	0·15
Number of women dying in, or in consequence of, child-birth—	
From Sepsis	—
From other causes	—
Number of persons in receipt of out-door relief—	
(a) On 1st January, 1939	1,184
(b) On 1st January, 1938	1,139
Total grants in the way of Poor Law Relief, 31/3/38	£23,924
Total grants in the way of Poor Law Relief, 31/3/37	£29,912
Number of blind persons on the register (31st December, 1938)	163
Average domestic consumption of water per head, per day	24·75 galls.
Total consumption of water per head, per day	30·84 galls.
Rainfall during 1938	36·64
Hours of Sunshine during 1938	1,476
Number of new houses erected and completed during 1938	249
Average number of new houses erected during the preceding ten years	334

VITAL STATISTICS.

POPULATION.

The population at the census of 1921 was 71,900, and at the census of 1931, 78,927, showing an increase of 7,027 in the decennium. The Registrar-General's estimate of the population for the middle of 1938 is 78,600, being 360 persons less than the estimate for the middle of 1937.

BIRTH RATE.

The total number of births registered in the borough during 1938 was 870, being 44 less than last year. 110 of the total number of births were those of infants whose parents were domiciled outside the borough and 42 infants were born outside the borough, the parents being residents of Southport. Allowing for the necessary correction, the "local" births numbered 802 (35 less than last year). Of these, 402 were males and 400 females. The birth rate for the year was 10·2 per 1,000 persons living.

Of the "local" births, 749 were legitimate and 53 illegitimate; i.e., 6·5% were illegitimate.

The number of still-births registered was 41, which is equivalent to a percentage of 4·86 of all live- and still-births. There were three still-births in the illegitimate group.

DEATH RATE.

The number of deaths registered in the town was 1,140. Of these 84 were deaths of persons ordinarily resident elsewhere, and these are excluded, leaving 1,056 deaths of Southport residents which have occurred in the borough. 159 residents during the year died outside the borough, and including these the deaths of Southport residents during the year numbered 1,215. Of these, 565 were males and 650 females.

The gross death rate (after exclusions and inclusions) 15·46

The rate corrected for age and sex 12·83

The following table gives the ratio of deaths in each of the various age groups to the total deaths (100).

RATIO OF DEATHS IN EACH OF THE VARIOUS AGE GROUPS TO TOTAL DEATHS (100).

	Under 1	1-2	2-5	5-15	15-25	25-45	45-65	65 and Upwards
1931	4·8	0·5	1·0	1·7	2·5	9·0	25·2	55·3
1932	3·7	0·7	1·3	0·7	2·3	7·2	27·3	56·8
1933	3·7	0·7	0·8	0·8	1·6	9·7	24·6	58·1
1934	3·7	1·0	1·0	1·4	1·9	6·9	26·9	57·2
1935	4·5	0·5	0·2	1·0	2·0	7·2	24·9	59·8
1936	3·45	0·34	0·76	1·18	1·35	7·23	26·66	59·03
1937	4·42	0·39	0·63	1·34	1·26	5·45	27·09	59·42
1938	4·61	0·66	0·66	0·90	1·65	4·94	25·43	61·15

33·17% of deaths occurred at the age of 75 years and over.

PRINCIPAL CAUSES OF DEATH.

Tuberculosis (all forms)	34
Cerebral Haemorrhage	104
Cancer	184
Heart Disease	305
Respiratory Diseases	160
Acute and Chronic Nephritis	47
Violence, including suicide	51
Senility	46

Fifty-one deaths were recorded as due to violence. There were 18 deaths from suicide, an increase of four on the previous year. Excluding suicide there were 33 deaths from violence and 27 of these were due to the following causes :—

Found drowned 3	Road Accidents 13	Falls 6
Suffocation 3	Works' Accidents 2	

ZYMOTIC DEATH RATE.

Diphtheria (5)	Typhoid nil	Diarrhoea (4)
Scarlet Fever (1)	Measles (1)	Whooping Cough nil
Total Deaths (11). Rate per 1,000, 0·14.		

INFANTILE MORTALITY RATE.

Total deaths 56.	Rate per 1,000 births	69·8
Legitimate 49.	Do.	65
Illegitimate 7.	Do.	132

TABLE 1. VITAL STATISTICS OF WHOLE DISTRICT DURING 1938 AND PREVIOUS YEARS.
COUNTY BOROUGH OF SOUTHPORT.

YEAR	Population estimated to Middle of each year	BIRTHS			TOTAL DEATHS REGISTERED IN DISTRICT. Z.		TRANSFERABLE DEATHS a		NETT DEATHS BELONGING TO THE DISTRICT.			
		Uncor-rected Number 3	Nett.		Number x 6	Rate 7	of Non-residents regist'd in the District 8	of Resi-dents not regist'd in the District 9	Under 1 year of age		At all ages.	
			Number 4	Rate 5					Number x 10	Rate per 1,000 Nett Births 11	Number x 12	Rate 13
1	2	3	4	5	6	7	8	9	10	11	12	13
1922	72,020	1023	1028	14.27	940	13.05	79	114	58	56	975	13.54
1923	72,410	1012	996	13.76	940	12.98	69	106	65	65	977	13.49
1924	73,650	952	934	12.90	977	13.24	78	109	59	63	1006	13.66
1925	74,260	988	973	13.10	880	11.85	56	118	59	61	937	12.62
1926	77,970	942	928	11.90	878	11.26	72	124	58	62	930	11.93
1927	78,670	973	958	12.18	1002	12.64	64	130	46	48	1067	13.56
1928	79,290	959	957	11.54	1002	12.64	72	132	69	75	1044	13.17
1929	80,040	929	896	11.07	1073	13.41	86	179	65	73	1146	14.32
1930	80,700	921	890	11.03	1035	12.82	72	165	66	74	1101	13.64
1931	77,280	877	824	10.66	1062	13.74	67	185	56	68	1157	14.97
1932	78,770	915	886	11.25	1019	12.94	68	150	40	45	1079	13.70
1933	78,980	805	769	9.51	1128	14.28	73	157	44	57	1189	15.05
1934	79,100	918	860	10.87	998	12.62	61	153	40	46	1070	13.53
1935	79,300	872	808	10.19	1104	13.92	63	143	52	64	1161	14.64
1936	79,280	880	804	10.14	1105	13.94	81	182	41	51	1189	15.00
1937	78,960	914	837	10.60	1143	14.48	63	205	56	67	1266	16.03
1938	78,600	870	802	10.20	1157	14.65	84	159	56	70	1215	15.46

Z Including deaths in the Borough Isolation Hospital in the West Lancashire Rural District.

x In Column 6 are included the whole of the deaths registered during the year as having actually occurred within the district, military deaths excepted.

In Column 12 is entered the number in Column 6, corrected by subtraction of the number in Column 8 and by the addition of the number in Column 9. Deaths in Column 10 are similarly corrected by subtraction of the deaths under 1, included in the number given in Column 8, and by addition of the deaths under 1 included in the number given in Column 9.

(a) "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales die in a district other than that in which they resided.

The following Special Cases arise as to Transferable Deaths :—

(1) Persons dying in Institutions for the sick or infirm, such as hospitals, lunatic asylums, workhouses and nursing homes (but not almshouses) have been regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission the death is not transferable.

(2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement have been referred to the district of fixed or usual residence of the parent.

(3) Deaths from violence have been referred (a) to the district of residence, under the general rule ; (b) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known ; (c) failing this, to the district where the death occurred, if known : and (d) failing this, to the district where the body was found.

	Census		
	1911	1921	1931
Total population at all ages	69,643	71,900	78,927
Number of inhabited houses	15,676	16,314	20,388
Average number of persons per house	4.44	4.41	3.87
Area of District in acres (land and inland water)	9,426	9,426	9,426

TABLE II.

Showing the total number of Cases of Infectious Disease notified in the Borough, and the Deaths resulting therefrom, during the last 10 years (1929--1938). It includes the Deaths which occurred both in the Borough Infectious Diseases Hospital (outside the Borough).

	NUMBER OF CASES OF INFECTIOUS DISEASE NOTIFIED											Total Cases for 10 years 1929 to 1938	DEATHS FROM INFECTIOUS DISEASE											Total Deaths during 10 years 1929 to 1938	Case Mortality (of all cases) in Borough and Hosp. for 10 years 1929 to 1938
	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1929		1930	1931	1932	1933	1934	1935	1936	1937	1938				
Scarlet Fever	234	269	166	120	131	184	84	265	209	208	1870	2	3	—	—	—	—	1	1	1	8	0.43%			
Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Diphtheria	168	205	178	95	42	22	72	14	81	143	1020	3	6	6	3	1	1	5	—	6	5	36	3.53%		
Typhus	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Typhoid Fever	1	2	2	5	—	1	1	—	—	—	12	1	2	—	—	—	—	—	1	—	—	4	33.33%		
Para-Typhoid Fever	2	1	11	4	1	1	1	1	—	1	23	—	—	—	—	—	—	—	—	—	—	—	—		
Continued Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Erysipelas	54	49	32	23	34	27	24	21	26	42	332	1	1	—	—	1	—	—	—	—	—	5	1.51%		
Puerperal Fever	3	4	1	3	2	—	1	2	3	2	21	—	—	1	1	—	1	1	2	—	—	6	28.57%		
Puerperal Pyrexia	6	11	11	14	4	7	6	4	7	7	77	—	—	—	—	—	—	—	—	—	—	—	—		
Cerebro-Spinal Meningitis	—	1	—	—	1	—	—	—	—	—	2	—	1	—	—	1	1	—	—	—	3	—	—		
Poliomyelitis	4	—	1	3	1	—	1	—	—	2	12	—	—	—	1	—	—	—	—	—	1	8.33%			
Pulmonary Tuberculosis	59	69	55	41	60	43	43	47	57	50	524	44	60	40	33	40	36	31	33	25	375	71.56%			
Other Forms of Tuberculosis	27	24	32	19	30	36	28	28	13	24	261	7	9	9	7	9	8	4	8	9	78	29.88%			
Ophthalmia Neonatorum	12	8	6	2	3	3	1	3	5	2	45	—	—	—	—	—	—	—	—	—	—	—	—		
Chicken Pox*	430	295	453	405	291	300	446	406	300	318	3644	—	—	—	—	—	—	—	—	—	—	—	—		
Measles*	581	889	305	355	346	1105	142	327	1148	231	5429	3	2	—	1	3	8	—	1	2	1	21	0.39%		
German Measles	50	30	74	144	28	69	15	112	93	20	635	—	—	—	—	—	—	—	—	—	—	—	—		
Whooping Cough*	149	230	287	277	165	136	166	460	134	166	2220	1	3	4	1	2	—	—	5	1	—	17	0.77%		

The following additional notifications were received during 1938 :—Pneumonia (all forms) 88 ; Bacilliary Dysentery 10.

*Chicken-pox, Measles and Whooping Cough were made compulsorily notifiable in Southport in May, 1902, and Cerebro-Spinal Meningitis, Poliomyelitis and Ophthalmia Neonatorum in February, 1912.
Measles, German Measles and Whooping Cough :—Only the first case in a house in two months is notifiable.

TABLE IIIa.—VITAL STATISTICS.

Year	Popu- lation	DEATHS																	Rate per 1,000 Popu- lation	Zymotic Diseases	Rate per 1,000 Popu- lation
		Male	Female	Total	Rate per 1,000 Popu- lation	Cor- rected for Age and Sex	Under One Year	Rate per 1,000 Births	Legiti- mate	Rate per 1,000 Births	Illegiti- mate	Rate per 1,000 Births	Pulm'y Tuber- culosis	Rate per 1,000 Popu- lation	Other Forms T.B.	Rate per 1,000 Popu- lation					
1925	74260	435	502	937	12.62	10.70	59	61	54	59	5	89	44	0.59	10	0.13	11	0.14			
1926	77970	434	496	930	11.93	10.12	58	62	52	60	6	92	36	0.46	8	0.10	18	0.23			
1927	78670	496	571	1067	13.56	11.50	46	48	41	46	5	75	41	0.52	7	0.09	9	0.11			
1928	79290	458	586	1044	13.17	11.17	69	75	61	71	8	140	39	0.49	10	0.13	16	0.20			
1929	80040	533	613	1146	14.32	12.14	65	72	57	68	8	148	44	0.55	7	0.09	14	0.17			
1930	80700	468	633	1101	13.64	11.56	66	74	52	63	8	222	60	0.74	9	0.11	19	0.24			
1931	77280	510	647	1157	14.97	12.69	56	68	53	68	3	55	40	0.52	9	0.12	16	0.21			
1932	78770	495	584	1079	13.70	11.62	40	45	35	42	5	79	33	0.42	7	0.09	8	0.10			
1933	78980	517	672	1189	15.05	12.76	44	57	38	53	6	115	40	0.51	9	0.11	7	0.09			
1934	79100	481	589	1070	13.53	11.23	40	46	37	45	3	79	38	0.48	9	0.11	11	0.14			
1935	79300	500	661	1161	14.64	12.15	52	64	51	68	1	18	31	0.39	4	0.05	9	0.11			
1936	79280	557	632	1189	15.00	12.45	41	51	37	49	4	68	33	0.42	8	0.10	9	0.11			
1937	78960	566	700	1266	16.03	13.30	56	67	50	64	6	120	33	0.42	8	0.10	16	0.20			
1938	78600	565	650	1215	15.46	12.83	56	70	49	65	7	132	25	0.32	9	0.11	11	0.14			

TABLE IIIb.
BIRTHS AND STILLBIRTHS.

Year	Population	Males	Females	Total	Legiti- mate	Illegiti- mate	Rate per 1,000 Popu- lation	Still Births
1925	74260	499	474	973	917	56	13·10	—
1926	77970	465	463	928	863	65	11·90	—
1927	78670	480	478	958	891	67	12·18	—
1928	79290	458	457	915	858	57	11·54	35
1929	80040	470	426	896	842	54	11·07	45
1930	80700	464	426	890	827	63	11·03	45
1931	77280	403	421	824	769	55	10·66	42
1932	78770	450	436	886	823	63	11·25	63
1933	78980	390	379	769	717	52	9·74	24
1934	79100	477	383	860	822	38	10·87	45
1935	79300	426	382	808	754	54	10·19	41
1936	79280	412	392	804	745	59	10·14	34
1937	78960	388	449	837	787	50	10·60	35
1938	78600	402	400	802	749	53	10·20	41

TABLE IIIc.
MATERNAL MORTALITY.

Year	No. of Live and Still Births	RATES PER 1,000 LIVE AND STILL BIRTHS					
		Sepsis		Other Causes		Total	
		No.	Rate	No.	Rate	No.	Rate
1925	973*	1	1.03	1	1.03	2	2.06
1926	928*	—	—	5	5.39	5	5.39
1927	958*	—	—	4	4.18	4	4.18
1928	950	—	—	2	2.11	2	2.11
1929	941	—	—	4	4.25	4	4.25
1930	935	3	3.20	7	7.49	10	10.69
1931	866	1	1.15	4	4.62	5	5.77
1932	949	1	1.06	6	6.32	7	7.38
1933	793	—	—	3	3.78	3	3.78
1934	905	—	—	3	3.31	3	3.31
1935	849	1	1.18	3	3.53	4	4.71
1936	838	1	1.19	2	2.39	3	3.58
1937	872	2	2.29	2	2.29	4	4.58
1938	843	—	—	—	—	—	—

*Live births only.

TABLE IV.—BIRTH-RATES, DEATH-RATES AND ANALYSIS OF MORTALITY IN THE YEAR 1938.
England and Wales—126 County Boroughs and Great Towns, and 148 Smaller Towns.

(Provisional figures, based on Weekly and Quarterly Returns).

	Rate per 1,000 total population		Annual Death-Rate per 1,000 Population								Rate per 1,000 Live Births	
	Live Births	Still-Births	All Causes	Typhoid and Paratyphoid Fevers	Small-pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea & Enteritis (under 2 years)	Total Deaths under 1 year
England and Wales	15.1	0.60	11.6	0.00	0.00	0.04	0.01	0.03	0.07	0.11	5.5	53
126 County Boroughs and Great Towns, including London	15.0	0.65	11.70	0.00	—	0.05	0.01	0.03	0.07	0.10	7.8	57
148 Smaller Towns (Estimated Resident Population 25,000 to 50,000 at Census, 1931)	15.4	0.60	11.0	0.00	0.00	0.03	0.01	0.02	0.06	0.11	3.6	51
London	13.4	0.48	11.4	0.00	—	0.06	0.01	0.03	0.05	0.06	13.1	57
Southport	10.2	0.52	15.46	0.00	—	0.01	0.01	—	0.06	0.10	5.0	70

The maternal mortality rates for England and Wales are as follows :				Puerperal		
				Sepsis	Others	Total
per 1,000 Live Births	per 1,000 Live Births	per 1,000 Live Births	per 1,000 Live Births	0.89	2.19	3.08
per 1,000 Total Births	per 1,000 Total Births	per 1,000 Total Births	per 1,000 Total Births	0.86	2.11	2.97
per 1,000 Live Births	per 1,000 Live Births	per 1,000 Live Births	per 1,000 Live Births	—	—	—
per 1,000 Total Births	per 1,000 Total Births	per 1,000 Total Births	per 1,000 Total Births	—	—	—

TABLE V.
Causes of, and Ages at, Death during the Year 1938.

Causes of Death	Totals All Ages	Sex		Age Distribution										
		M.	F.	Under 1 year	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 up
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1. Typhoid and Paratyphoid Fevers	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2. Measles	1	1	—	—	—	—	—	1	—	—	—	—	—	—
3. Scarlet Fever	1	1	—	—	—	1	—	—	—	—	—	—	—	—
4. Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—
5. Diphtheria	5	1	4	—	—	—	5	—	—	—	—	—	—	—
6. Influenza	10	6	4	—	—	—	—	—	—	—	2	2	5	1
7. Encephalitis Lethargica	2	—	2	—	—	—	—	—	—	1	—	—	1	—
8. Cerebro-spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—
9. Tuberculosis of Respiratory System	25	18	7	—	—	—	—	5	4	7	5	3	1	—
10. Other Tuberculous Diseases	9	3	6	—	1	2	1	2	—	—	1	1	1	—
11. Syphilis	3	2	1	—	—	—	—	—	—	1	—	1	1	—
12. General Paralysis of the Insane, Tabes Dorsalis	1	1	—	—	—	—	—	—	—	—	—	—	1	—
13. Cancer, Malignant Disease	184	70	114	—	1	—	—	1	2	8	17	50	58	47
14. Diabetes	23	8	15	—	—	—	1	1	—	—	1	3	10	7
15. Cerebral Haemorrhage, etc.	104	40	64	—	—	—	—	1	2	—	14	16	26	45
16. Heart Disease	305	141	164	—	—	1	1	1	1	1	17	47	101	135
17. Aneurysm	4	4	—	—	—	—	—	—	—	—	1	1	2	—
18. Other Circulatory Diseases	95	45	50	—	—	1	—	—	—	1	3	17	35	38
19. Bronchitis	20	8	12	1	—	—	—	—	—	—	—	1	5	13
20. Pneumonia (all forms)	45	32	13	5	2	—	—	—	1	1	5	11	13	7
21. Other Respiratory Diseases	11	8	3	1	—	—	—	—	—	1	2	3	3	1
22. Peptic Ulcer	10	10	—	—	—	—	—	—	—	—	1	2	4	3
23. Diarrhoea	6	4	2	2	2	—	—	—	—	—	—	—	—	2
24. Appendicitis	7	3	4	—	—	1	—	—	—	1	2	—	1	2
25. Cirrhosis of Liver	5	2	3	—	—	—	—	—	—	—	2	1	1	1
26. Other Diseases of Liver, etc.	11	6	5	—	—	—	—	—	1	3	—	2	—	5
27. Other Digestive Diseases	17	8	9	3	—	—	—	2	1	1	2	1	3	4
28. Acute and Chronic Nephritis	47	23	24	—	—	—	—	—	1	2	3	7	15	19
29. Puerperal Sepsis	—	—	—	—	—	—	—	—	—	—	—	—	—	—
30. Other Puerperal Causes	—	—	—	—	—	—	—	—	—	—	—	—	—	—
31. Congenital Debility, Premature Birth, Malformations etc.	39	24	15	38	—	1	—	—	—	—	—	—	—	—
32. Senility	46	12	34	—	—	—	—	—	—	—	—	1	7	38
33. Suicide	18	14	4	—	—	—	—	—	1	7	3	3	3	1
34. Other Violence	33	17	16	2	—	1	1	2	4	3	4	6	6	4
35. Other Defined Diseases	114	46	68	4	2	—	2	4	2	2	14	28	31	25
36. Causes Ill-defined or Unknown	14	7	7	—	—	—	—	—	—	—	1	2	6	5
TOTALS	1215	565	650	56	8	8	11	20	20	40	100	209	340	403

Part II.

**GENERAL PROVISION OF HEALTH
SERVICES FOR THE AREA.**

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

STAFF.

A list of the members of the staff of the Public Health Department is set out at the beginning of this Report. Dr. W. D. Hood left in September to take up an appointment with the Department of Health for Scotland. Dr. F. E. Crawley, M.D., D.P.H., was appointed to the vacant position of Deputy Medical Officer of Health created by Dr. Hood's departure, and commenced his new duties on November 20th, 1938.

There were three changes in the clerical staff of the Department. Mr. H. Griffiths retired on superannuation at the end of January, and Miss Taylor and Miss Singleton left to get married. The vacancies were filled by Mr. K. C. Vidler, Miss Gweneth Lloyd, and Miss Edith Askew respectively.

LABORATORY FACILITIES.

There were no changes under this heading during the year. Specimens for pathological examination are sent to the Laboratory at the Infirmary, and an arrangement exists with the Thompson-Yates Laboratories, Liverpool University for the bacteriological examination of supplies of milk and water. Samples of foods and drugs in respect of which a bacteriological report is required are also sent to the University ; such samples for chemical analysis are sent to the City Analyst of Liverpool, who also holds the position of Public Analyst for Southport.

AMBULANCE FACILITIES.

The Corporation has an efficient ambulance service for the removal of infectious disease cases. Patients for admission to the Maternity Hospital are required to make their own arrangements, and the St. John's Ambulance is available for this purpose at a reasonable charge.

The ambulances for accident cases are controlled by the Police Department, and it is understood that the arrangements in this connection are complete and satisfactory.

NURSING IN THE HOME.

This service has been provided by the local District Nursing Association for many years. Recently, the staff has been increased to seven nurses under the direction of the Matron. The cost of the service has increased proportionately, and the Southport Corporation decided, with the sanction of the Ministry, to make a grant of £150 per annum. The larger staff enables the Association to include the Crossens district within their scheme, thus covering the whole area of the County Borough. The work of the Association is of the greatest value to the community, and they deserve whole-hearted support.

TREATMENT CENTRES AND CLINICS.

The following is a complete list of Centres and Clinics provided by the Corporation :—

INFANT WELFARE CENTRES.

Liverpool Road Centre, Methodist Schools	Tuesdays, 2 to 4 p.m.	Consultation, Advice, etc.
Crossens Centre, Rufford Road	Wednesday, 2 to 4 p.m.	do.
High Park Centre, 92, Poulton Road	Wednesday, 2 to 4 p.m.	do.
Hampton Road Centre, Hampton Road	Thursday, 2 to 4 p.m.	do.
Hoghton Street Centre, Baptist Schools, Hoghton Street	Friday, 2 to 4 p.m.	do.

POST-NATAL CLINIC.

44, Hoghton Street	Monday, 2 to 4 p.m.	Consultation, Examination, Advice
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ANTE-NATAL CLINICS.

44, Hoghton Street	Thursday, 9-30 to 12 noon	Consultation, Examination Advice, etc.
Maternity Hospital, Curzon Road	Friday, 11 a.m. to 12-30 p.m.	Examination, and Treatment

TUBERCULOSIS.

Dispensary, 2, Church Street	Tuesday, 2 to 4 p.m.	Consultation
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VENEREAL DISEASES.

Pilkington Road	Daily. Men	Treatment
do.	Women	Treatment
do.	Monday and Thursday, 6 to 7-30 (Men)	Consultation and Treatment
do.	Tuesday, 2 to 3-30 p.m. (Women)	Consultation and Treatment

SKIN DISEASES.

Skin Department, Pilkington Road	Friday, 9 to 10 a.m. (Children only)	Consultation
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SCHOOL MEDICAL AT 2, CHURCH STREET, (*cf* School Medical Section, Part VIII, page 79.)

HOSPITALS, PUBLIC AND VOLUNTARY,

A general hospital service is provided by the Southport Infirmary, which in addition to out-patient departments, contains accommodation for 127 bed-patients. The published Annual Report of the Infirmary Board for the year 1938 shows that 2,699 persons received in-patient treatment at the Infirmary in that year, and that 6,899 persons (of which 1,431 were accident emergency cases) attended the Out-patient Department, and altogether made 60,042 visits.

The Corporation has an arrangement with the Infirmary Board for the treatment of cases of surgical tuberculosis, and during the year, 14 patients were treated at the Infirmary under this scheme.

In regard to hospitals belonging to the Corporation, a list is appended showing the nature of the hospitals, together with the accommodation thereat :

New Hall	(a) Fever	70 beds
	(b) Sanatorium	36 beds
Fleetwood Road	Aged and Chronic Sick	62 beds
Maternity Hospital	Maternity	30 beds
V.D. and Skin	V.D. and Skin	16 beds

An account of the work undertaken at each of these hospitals during the year 1938 is set out in various parts of this Report.

INSTITUTIONAL MEDICAL SERVICES AND MEDICAL OUT-RELIEF.

The County Borough of Southport Administrative Scheme, 1937, details of which were given in last year's Annual Report (pages 22 and 23), was put into operation during the year.

Lincoln House Children's Home and the care of boarded-out children are now administered directly by the Education Committee. The Health Visitors continue to carry out visiting duties in connection with boarded-out children and to that extent only do these children come under the supervision of the Health Department.

The Health Committee took over, under the new scheme, the responsibility for arranging for the care and maintenance of all sick persons requiring relief in Poor Law Establishments. There is no Poor Law Hospital in the County Borough of Southport and the arrangement with Lancashire County Council for the admission of poor law patients to the County Hospital, Ormskirk was continued. A rota of members was drawn up for visiting the County Hospital and these visits are arranged monthly. The type of cases coming under the care of the Health Committee may be classified as follows :—

- (a) Persons suffering from sicknesss, accident or bodily infirmity.
- (b) Persons suffering from mental infirmity, (i) certified under the Lunacy or Mental Deficiency Acts (ii) not so certified.

Persons coming under categories (a) and (b) (ii) are cared for at the County Hospital, Ormskirk, and those under (b) (i) at institutions suitable for such persons in other parts of the County, the maintenance charges being paid by this authority.

The table on page 26 shows the number of cases in the Ormskirk County Hospital, on the 1st January, 1939, together with the numbers for the preceding two years.

REGISTRATION OF NURSING HOMES.

Four applications for the registration of nursing homes were received during the year and three were approved by the Health Committee. Two of the approved applications were in respect of re-registrations on account of change in the name of the person in charge of home.

FLEETWOOD ROAD HOSPITAL.

This hospital was opened in 1931 for the treatment of aged chronic sick people under powers granted in the Local Government Act, 1929. The hospital accommodates 62 patients, 21 men and 41 women.

The extensions referred to in last year's Report are now in course of crection and will be completed before the end of 1939. Much improved accomodation for the nursing staff is thus being provided.

Patients for admission to the hospital are selected from Southport residents at the Ormskirk County Hospital. Twenty-four men and 34 women were under treatment at Fleetwood Road Hospital on the 1st January, 1938 and 39 new patients were admitted during the year. Thirteen patients were discharged during the year and 24 died. Thus there were 60 patients, 20 men and 40 women in hospital on the 31st December, 1938.

SOUTHPORT AND BIRKDALE DAY NURSERY.

This day nursery closed down on the 31st March, 1939. The Committee of Management had given notice to the Health Committee that owing to falling attendances it was considered desirable to close down, and after due inquiry had been made, the latter were reluctantly compelled to accept the decision. The attendances for the past three years ending on the 31st March in each case are shown below :—

	1937	1938	1939
Individual children admitted	42	62	42
Attendances (days)	2556	2463	1512
Average weekly attendance	56	54	34

VACCINATION.

The number of certificates of successful vaccination received during the year was 194, as compared with 177 for 1937, and 160 for 1936. Statutory declarations of conscientious objection to vaccination totalled 515, as against 566 and 532 in the previous two years.

COUNTY HOSPITAL, ORMSKIRK.
SOUTHPORT CASES.

Showing the number of patients in the Hospital on the 1st January each year.

Year	Persons suffering from sickness, accident, or bodily infirmity, whether arising from Old Age or otherwise (excluding persons suffering from Mental Infirmity).				Persons suffering from Mental Infirmity				Persons not suffering from sickness, accidents, or bodily or mental infirmity (including aged persons who do not require regular nursing care or treatment).				TOTAL	
	Certified under the Lunacy or Mental Deficiency Acts				Not so certified									
	Men.	Women.	Children between 3 and 16 years of age.	Infants (under 3 years of age).	Men	Women	Children (under 16 years of age)	Men.	Women.	Children between 3 and 16 years of age.	Infants (under 3 years of age).			
1937	16	18	1	3	15	27	—	2	10	—	22	14	7	135
1938	8	14	—	—	14	25	—	6	9	1	10	18	4	109
1939	9	8	—	—	12	22	—	1	—	—	13	22	2	89

COUNTY BOROUGH OF SOUTHPORT.

Statement of Hospital Costs for the Twelve Months ended 31st March, 1938 and 1939.
(Submitted in accordance with Minute No. 546, dated 16th December, 1937).

	New Hall Hospital (Tuberculosis Section)		New Hall Hospital (Infectious Diseases Section)		Christiana Hartley Maternity Hospital		Fleetwood Road Hospital		V.D. and Skin Diseases Hospital	
	1938	1939	1938	1939	1938	1939	1938	1938	1938	1939
	£	£	£	£	£	£	£	£	£	£
1. Salaries, Wages and Uniforms	910	1026	2440	2502	1465	1803	1394	648	677	
2. Provisions for Inmates and Staff	1003	1108	1324	1282	753	839	1135	233	214	
3. Drugs and Appliances	175	165	502	449	141	177	81	26	45	
4. Fuel, Light, Water and Laundry	460	552	1222	1385	778	832	811	199	202	
5. Domestic Renewals and Additions	147	108	420	309	57	62	248	72	73	
6. Structural Renewals and Additions	485	256	670	730	206	9	34	58	49	
7. Transport	64	361	95	462	1	—	3	—	1	
8. Miscellaneous	49	31	114	85	148	170	169	61	42	
9. Rents, Rates, Taxes and Insurance	128	144	365	413	96	95	26	28	28	
10. Loan Charges	1571	1533	4496	4385	—	—	778	198	185	
11. Less Miscellaneous Income	4992	5284	11648	12002	3645	3987	4679	1523	1516	
	76	137	217	341	—	—	—	—	—	
12. GROSS COST (Less Miscellaneous In- come)	4916	5147	11431	11661	3645	3987	4679	1523	1516	
13. Less Income from Inmates	97	257	181	117	2333	2417	1816	182	243	
14. NET COST	4819	4890	11250	11544	1312	1570	2863	1341	1273	
Cost per Inmate Day—										
15. Gross Cost (Less Miscellaneous Income)	s. d. 10 2	s. d. 8 9	s. d. 16 0	s. d. 15 8	s. d. 11 2	s. d. 11 6	s. d. 4 3	s. d. 19 11	s. d. 20 0	
16. Net Cost (Less Income from Inmates)	10 0	8 5	15 9	15 6	4 0	4 6	2 7	17 7	16 9	
17. Actual Number of Inmate Days (Ex- cluding Infants)	9641	11673	14291	14884	6532	6923	21869	1528	1516	
18. Average Number of Beds Occupied (Excluding Infants)	26.3	32.0	39.0	40.8	17.8	19.0	59.9	4.2	4.2	
19. Average Number of Beds Available (Excluding Cots)	36	70	32	61	62	10				

Borough Treasurer's Office, Town Hall, Southport, 18th April, 1939.

MATERNITY AND CHILD WELFARE.

The year has been chiefly remarkable for the further unification and co-ordination of the Midwifery Services of the town. It was the first complete year of the working of the service of Municipal Midwives, it saw the setting up of the emergency unit for use in complicated domiciliary cases, and during it, the Post-natal Clinic was officially opened.

ANTE-NATAL SERVICES.

As in previous years, two weekly clinics have been held, and these have been supplemented by the payment of fees to general practitioners for ante-natal visits in certain cases.

MATERNITY HOSPITAL CLINIC.—This clinic is held at the Christiana Hartley Hospital, and conducted by the Medical Officer in charge of the Hospital. Besides doing routine work for those who are to be confined there, the clinic acts as a centre for consultation in doubtful cases brought forward by midwives or doctors. In 1938, 344 patients made 2,156 visits.

CENTRAL ANTE-NATAL CLINIC.—This clinic is used by those patients who are to be confined at home, without the services of a doctor, and by those who, for any reason, are doubtful about the best arrangements to make. There, too, Municipal Midwives can be interviewed and booked by intending patients, and all general enquiries made.

During the year, 273 new patients attended the clinic, of whom 68 were primiparae. The general health of those who come does appear to be improving as time goes on, and although anaemia is still common, especially amongst the multiparae, severe cases which were seen even a few years ago are now uncommon and there can be no doubt that the majority of patients now come much earlier for advice than they did. Albuminuria was found in 30 cases, but in only four was it severe, or requiring more than out-patient supervision. The Maternity Hospital is always available for the admission of ante-natal cases which require it; admissions were necessary during the year for albuminuria, haemorrhage, death of foetus and delivery of a monstrosity.

General clinic services are available for those who require special investigation or treatment. Seven patients were examined at the Tuberculosis Dispensary, six had X-ray examinations at the Southport Infirmary, and 17 were referred to the Department for Venereal Diseases. Of the latter, seven were subsequently confined there.

The Maternity Dental Clinic is used by both expectant and nursing mothers, but those who are pregnant still show considerable reluctance to undergo extensive treatment to their teeth. At the Clinic, 175 women made 746 attendances.

Attendances at Central Ante-Natal Clinic for the last five years :—

	1st visits		Re-visits		Total
1934	161	...	536	.....	697
1935	200	...	680	...	880
1936	201	.....	687	.....	888
1937	268	.....	765	.....	1,033
1938	273	.....	980	.....	1,253

EXTRA NOURISHMENT.—In cases of necessity, free pasteurised milk is issued to expectant mothers. This supply may be allowed at any stage of the pregnancy, and is not confined to the later months. 763 gallons were supplied during 1938.

HOME HELP.—Late in 1937 a combined appointment was made of a Sewing Maid to the Hospitals and Home Help during the lying-in period. This arrangement has worked well ; it is supplemented by occasional provision of help paid for by the voluntary committee, when more than one application is received at a time. Help was given in twenty-one cases in 1938.

DOMICILIARY MIDWIFERY.

1938 was the first complete year of the working of the service of Municipal Midwives, and the provision of four full-time appointments has proved adequate, at any rate for the time being. The area of the town divides itself, for the purpose of the service roughly into two halves, so that it is possible for the midwives to work in pairs, relieving each other for periods of "off duty." It has been found necessary to alter slightly the areas so as to distribute the cases more evenly. The distribution during the year has been as follows :—

Area 1 : Midwife A (49) ; Midwife B (35).

Area 2 : Midwife C (77) ; Midwife D (77).

The Municipal Midwives have, as part of their duty, to attend at the Central Ante-Natal Clinic, and this is found to be a useful method of co-ordinating the work. In addition, they have been able to take occasional duty at the Maternity Hospital, and have at the same time had the benefit of being in contact with up-to-date institutional practice.

Altogether sixteen midwives notified their intention to practise ; this figure, compared with twenty three in the previous year, shows one result of the 1936 Act, viz :—the provision of fewer midwives in a district, each having more cases, and therefore more constant experience than was formerly the case. Independent midwives attended 106 cases in which they acted as midwives, and 162 as maternity nurses. The supervisor of Midwives paid 79 visits of inspection.

MATERNITY HOSPITAL.

During the year 1938 the number of cases admitted was 369, whilst 36 cases were admitted for ante-natal treatment. Of the mothers, 195 were primiparae, and therefore attending the hospital for the first time ; 174 were multiparæ. There were 22 emergency admissions.

Among the special conditions to be noted were : Miscarriage (8) ; Severe albuminuria (5) ; Hyperemesis (1) ; Threatened Eclampsia (3) ; Pyelitis (1) ; Ante-partum Haemorrhage (3) ; Post-partum Haemorrhage (2) ; White Leg (1) ; Placenta Praevia (4).

Of the children born during the year, 162 were girls and 201 were boys. There were 20 Stillbirths and 15 Neo-natal (within 10 days) deaths. The causes of the infant deaths were : Prematurity (8), Atelectasis (3), Convulsions (3), and Spina Bifida (1). There were two cases of Ophthalmia Neonatorum. Three hundred and forty-four patients attended the Ante-Natal Clinic, making a total of 2,156 attendances. The following special procedures were carried out : Induction of Labour (3), Forceps deliveries (6), Caesarean Sections (8), Manual removal of placenta (2).

CHILD WELFARE CENTRES.—Five sessions are held per week in different parts of the town. Every effort has been made to make the work as productive as possible, and to avoid overcrowding of the centres by unnecessarily frequent visits. There are indications that the mothers are appreciative of this point of view, and although a larger number of individual children are making visits at less frequent intervals, the total attendances still show a tendency to rise, e.g., in 1937, total attendances of mothers and children were 34,872, while in 1938 they were 37,973. The greatest rise was amongst the toddlers, 8,625 to 10,060.

Educational activities at the Centres have been continued, on the usual lines. Lectures in the early months of the year followed the lines of the National Health Campaign then in progress and aroused particular interest. Keep-fit classes for mothers were attended enthusiastically, and in March the members of the classes took a large and successful part in a public keep-fit demonstration. This was organised by the Health Department in conjunction with the Lancashire Keep-Fit Movement for Women, and was designed to interest people of both sexes and all ages in various forms of recreative physical activity.

CHRISTIANA HARTLEY MATERNITY HOSPITAL

Number of Beds.....30.

	1936	1937	1938
Admitted during the year	312	347	369
Average duration of stay (days)	18	18	18
Delivered by :			
(a) Midwives	278	278	303
(b) Doctors	34	65	64
Number of cases in which medical assistance was sought by a midwife in emergency	42	50	53
Number of cases notified as :			
(a) Puerperal Fever	1	—	—
(b) Puerperal Pyrexia	3	3	2
Number of cases of Pemphigus Neonatorum	—	—	—
Number of cases notified as Ophthalmia Neonatorum	1	4	2
Number of infants not entirely breast-fed while in the Institution	22	37	40
Number of maternal deaths	—	2	1
Number of infant deaths :			
(a) Still-born	19	17	20
(b) Within ten days of birth	20	15	15

ST. KATHARINE'S HOME.

MATERNITY CASES.

In Institution on Jan. 1st.		Admitted during the year.	DISCHARGED DURING THE YEAR.								In the Institution on Dec. 31st.	Mother days.
			To the Union.	To the V.D. Ward.	To Hos- pital	Own Homes.	Other Homes.	To Mat. Hospi- tal.	Domes- tic Service.	Died.		
1932	7	25	1	1	1	17	3	1	3	—	5	2413
1933	5	20	—	2	—	13	2	—	2	—	6	2580
1934	6	32	1	3	—	13	6	—	8	—	7	3001
1935	7	34	1	3	—	19	7	1	1	—	9	2899
1936	9	46	4	4	—	26	10	—	5	—	6	2530
1937	6	48	1	3	—	28	3	1	6	—	12	2278
1938	12	48	1	—	2	30	5	1	6	—	15	3780

INFANTS.

	In In-stitution on Jan. 1st.	Ad-mitted during the year.	Born in Home during the year.	DISCHARGED DURING THE YEAR.						In In-stitut'n on Dec. 31.	Infant days.
				Dis- charged with their Mothers.	To Foster- Mothers and Adopt'ns	To another Home.	To the V.D. Ward.	To the Union.	Deaths and Still- births.		
1932	4	5	16	13	2	4	1	1	—	4	1813
1933	4	2	12	9	2	3	—	—	1	3	1584
1934	3	6	20	7	6	4	3	1	3	5	1728
1935	5	1	27	6	5	9	2	2	3	6	2016
1936	6	5	35	12	8	14	2	4	1	5	2025
1937	5	2	34	21	10	5	1	1	—	3	1198
1938	3	2	46	14	14	6	—	2	3	12	1248

CAUSES OF INFANT MORTALITY, 1938.

Causes of Death	Under one week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 1 month	1 to 3 months	3 to 6 months	6 to 9 months	9 to 12 months	Total under 1 year
Meningitis	—	—	—	—	—	1	—	—	—	1
Intussusception	—	—	—	—	—	—	1	—	—	1
Congenital Heart Disease	1	—	1	—	2	1	—	—	—	3
Convulsions	2	—	—	—	2	1	—	1	—	4
Congenital Deformity	1	—	—	1	2	—	—	—	—	2
Bronchitis	—	—	—	—	—	—	1	—	—	1
Pneumonia (all forms)	1	1	—	—	2	3	—	—	2	7
Haemorrhage	1	—	—	—	1	1	—	—	—	2
Gastro-Enteritis	—	—	—	—	—	1	1	—	—	2
Asphyxia	2	—	—	—	2	—	—	—	—	2
Pyloric Stenosis	—	—	—	—	—	2	—	—	—	2
Atelectasis	1	1	—	—	2	—	—	—	—	2
Premature Birth	17	—	3	1	21	—	—	—	—	21
Marasmus	1	—	—	—	1	2	—	—	—	3
Other Causes	1	1	—	—	2	—	—	1	—	3
TOTALS	28	3	4	2	37	12	3	2	2	56

MATERNITY DENTAL CLINIC—YEAR 1938.

Date.	Appointments.		Number of Visits		New Cases.	Extractions.	Anæsthetics.			Fillings.	Root Treatment.	Dressing.	Scaling.	Oral Affections.	Examined.	Impressions Taken.	Bite Taken.	Try In.	Finished Denture.				Repair.	Re-make.		
							Loc.	N ₂ O	Gen.										Partial.		Full.					
	Lst.	Re.	U.	L.																					U.	L.
Jan.	44	19	21	5	29	29	—	—	4	—	—	2	1	11	7	2	1	—	—	1	—	2	—			
Feb.	51	16	38	6	42	12	—	1	5	—	—	—	10	8	8	18	7	10	2	—	1	1	2	—		
Mar.	78	24	82	19	94	59	—	1	6	—	—	—	2	24	24	14	4	10	1	1	3	2	1	—		
April	55	6	44	3	63	31	—	1	3	—	—	—	6	10	9	9	1	8	2	1	1	1	1	—		
May	59	21	40	9	33	33	—	—	1	—	4	4	8	20	20	8	—	2	—	—	1	1	1	—		
June	49	6	42	3	26	2	—	1	7	2	1	1	2	14	16	16	4	5	1	1	2	3	1	—		
July	26	14	19	13	3	3	—	—	7	2	5	—	3	11	2	2	—	1	—	—	—	1	3	—		
August	18	12	17	9	10	10	—	—	—	—	—	—	1	4	10	6	2	1	—	—	1	1	1	—		
Sept.	72	18	76	12	121	56	—	3	11	2	—	2	2	8	23	24	10	6	—	—	1	1	1	2		
Oct.	77	21	78	17	65	25	—	2	9	—	3	1	11	25	25	18	5	14	3	1	3	13	5	—		
Nov.	68	13	69	8	37	12	—	1	—	—	—	—	—	23	12	26	6	12	—	—	3	3	—	—		
Dec.	52	5	45	3	25	5	—	1	—	—	2	—	—	9	12	17	2	12	2	1	3	3	3	3		
Totals ...	649	175	571	107	548	277	—	11	53	6	15	29	111	179	165	43	82	11	5	20	30	21	5	5		

Part III.

**SANITARY CIRCUMSTANCES OF
THE AREA.**

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The water supply is maintained by the Southport and District Water Board, which is a combination of the local authorities of the County Borough of Southport, the Urban District of Formby, and the West Lancashire Rural District. The Board supplies water within the area of these three authorities.

Owing to the distance from the mains, twelve houses on the outskirts of the County Borough are not supplied by the Water Board. In eleven of these the supply comes from eight shallow wells. With one exception the analyses of the water from these wells show that the supply is unsafe and instructions have been given that the water must be boiled before use as a drinking supply. The occupiers of one house obtain their supply from rain water which is first stored then filtered through a charcoal filter.

There are five pumping stations owned by the Water Board, and these are situated six to ten miles south-east of the town. The water from Scarth Hill does not come into Southport.

The wells and boreholes are all over 200 feet deep. Owing to the depth of the wells and the nature of the strata the possibilities of contamination are remote. The water has no plumbo-solvent action, and although somewhat hard is exceptionally pure, both chemically and bacteriologically.

The fifth pumping station was opened in July, 1934, and the water from this well shows a marked difference from the other four, being a much softer supply.

During the year ended 31st March, 1938, the Board supplied direct an estimated population of 119,640, excluding summer visitors. The average domestic consumption, excluding meter supplies, and based on this population figure, was at the rate of 24·75 gallons per head per day, and the total consumption of 30·84 gallons per head per day.

Samples of water are taken regularly, and reports of one of the periodical samplings are included in this Report, pages 37 and 38.

Samples from the various wells were sent to Drs. Beale and Suckling, Bacteriologists, London, on 26th July, 1938, by the Water Engineer, and the results of their examination showed that the water from all wells was of a high degree of bacterial purity and considered pure and wholesome.

The results of these examinations are shown below :—

COPY OF BACTERIOLOGICAL EXAMINATION OF SAMPLES OF WATER TAKEN
ON 26TH JULY, 1938 BY DRS. BEALE AND SUCKLING.

Number of Bacteria per c.c. on agar in three days at 20 °C.	Halsall Lane 10	Spring- field 90	Bicker- staffe 24	Scarth Hill 12	Blundell House 58
One day at 37 °C.	—	—	1	2	1
Two days at 37 °C.	4	4	1	2	5
Bacillus Coli absent in	100 c.c.	100 c.c.	100 c.c.	100 c.c.	100 c.c.
Bacillus Welchii absent in	100 c.c.	100 c.c.	100 c.c.	100 c.c.	100 c.c.

SAMPLE OF WATER SUBMITTED FOR BACTERIOLOGICAL
EXAMINATION on 1st October, 1938.

Number of organisms per c.c. of water grown on agar at 37 °C. for three days	1
Number of organisms per c.c. of water at room temperature in two days	10
Test for B.Coli	Absent in 100 c.c.
Streptococci faecalis	Absent in 100 c.c.
B.Welchii	Absent in 100 c.c.

THOS. B. DAVIE,
Professor of Pathology, University of Liverpool.

SAMPLE OF WATER SUBMITTED FOR CHEMICAL ANALYSIS
on 27th September, 1938.

	Parts per 100,000
Calcium Carbonate	17.4
Magnesium Carbonate	4.7
Magnesium Sulphate	9.2
Sodium Chloride	4.4
Sodium and Potassium Silicates, etc.	4.6
	<hr/> 40.3 <hr/>

	Parts per 100,000
Reaction to Litmus Neutral pH value 7.1	—
Temporary hardness	23.0
Permanent hardness	7.7
Total hardness	30.7
Ammonia	—
Ammonia from Organic Matter	—
Oxygen required to oxidise { in 15 minutes	0.010
{ in three hours	0.018
Nitrogen as Nitrates	Traces
Nitrogen as Nitrites	—
Combined Chlorine	2.65

The sample was clear, colourless and odourless. It was free from solid matters in suspension.

The water maintains its exceptionally high state of organic purity.

W. H. ROBERTS, M.Sc., F.I.C.

Drainage and Sewerage.—During the year five houses in an outlying part of the Borough were drained to a public sewer. In this way five cess-pools were abolished and the property brought to a more satisfactory standard of sanitation. There are eighty-two houses in the Borough which drain into cess-pools. This system of drainage is one of necessity and is tolerated only as such. All the houses where this obtains are situated in such a way that the water-carriage system cannot be installed until future development brings the sewer within the required distance and there is a fall from house drain to sewer. The cess-pool system depends upon the co-operation of occupiers for its success. In the main no difficulty is experienced in obtaining this, but the frequent emptying of the cess-pool “**when necessary, and at least once in every six months**” is essential. This is a duty which is clearly defined in the Southport byelaws with respect to the Cleansing of Cess-pools (1936). The law as it stands at present goes further and the Public Health Act, 1936, sec. 50, lays a further duty on the occupier or other responsible party to take the necessary steps to prevent the **overflowing or leaking** of cess-pools.

Negotiations are still being carried on with a neighbouring authority in connection with a joint scheme to sewer an area of land on the S.E. boundary of the Borough. Some time must elapse before this scheme can affect the outlying houses in this direction which lie within the Borough.

Household Refuse.—The work of collection and disposal of refuse is carried out by the Borough Engineer. The method of collection of household refuse used is that commonly known as the “Pagefield” system, which is a combination of the horse and motor collection. This system is augmented in certain parts of the Borough by motor lorry collection. Household refuse is disposed of by means of “controlled” tipping on waste land.

Statistics for the past five years kindly supplied by the Borough Engineer are set out below :—

	1934	1935	1936	1937	1938
Refuse collected : Loads	13,578	13,208	14,194	13,855	13,744
Tonnage	—	—	24,556	24,015	23,363
Ashpits replaced by ashbins	24	6	—	—	—

Sanitary Inspection of the Area.—For the purpose of sanitary inspection the Borough is divided into five districts each of which is under the control of one Sanitary Inspector. An account of the work of the inspectors is set out below :—

ABSTRACT OF WORK OF SANITARY INSPECTORS.

Total visits	28,870
Complaints received from public	1,372
Inspections on complaints	1,372
Miscellaneous inspections	7,056
Houses completely inspected—for in-going tenants, sickness, etc.	267
Re-inspections relating to sanitary defects under notice, etc.	3,933
Routine Inspections of Special Premises :	
Factories and Workshops, including Bakehouses	344
Common Lodging-houses	188
Stable Premises	29
Offensive Trades	229
Milk Shops and Dairies	652
Smoke Observations (one hour each)	13
Sanitary Defects remedied :	
Houses re-drained, or drains amended, etc.	253
Building and altering W.C.'s	509
Miscellaneous Nuisances, etc., remedied	986
Total	15,831

NUISANCES.

Notices served for Abatement of Nuisances, etc. :	
Verbal	144
Preliminary	614
Statutory	69
Sewer complaints reported to Highways Department	2
Sanitary Certificates issued	3

ABATEMENT OF NUISANCES.

Cases reported	1,844
Cases abated	1,843
Cases not abated	<u>1</u>
Work in progress	<u><u>1</u></u>

INFECTIOUS DISEASES.

Inquiries into cases	1,228
Patients removed to Isolation Hospital	524
Houses disinfected	519
Bedding disinfected	375
Schools disinfected	14
Stables and cowsheds disinfected	1

Shops.—The administration of the Shops Acts is carried out by the Weights and Measures Department. Instances of defects coming under Section 10 of the Shops Act, 1934, found by the inspectors of that Department are immediately reported to the Medical Officer of Health and suitable action taken.

Smoke Abatement.—Thirteen observations of one hour each were made by the inspectors as a result of which it was found necessary to give verbal warnings in a number of cases.

Swimming Baths and Pools.—The Victoria Baths are situated near the Pier and adjacent to Nevill Street. There are three sea-water swimming baths, 45 slipper baths filled with sea and fresh-water supplies, four “ Zotofoam ” and “ Pine Bubble ” baths, and in addition, suites of Turkish and Russian baths.

The sea-water supplied to the baths is treated by filtration, and samples of the bath water from the Plunge Baths, indicate an exceptionally high standard of purity.

The Baths are open all the year round and the number of bathers attending during 1938 was 105,401 in the Plunge Baths, Slipper Baths 9,530, Russian and Turkish Baths 2,752, and “ Zotofoam ” Baths 517.

The Canning Road Baths consist of one Open-Air Swimming Bath (to which there is free admission to boys and girls under 16 years of age), and six Slipper Baths. The number of bathers attending the Slipper Baths during the year was 3,909.

The Compton Road Baths comprise one Open-Air Swimming Bath (which is free to boys and girls under 16 years of age), and ten Slipper Baths. 5,164 persons made use of the Slipper Baths during the year.

A large Open-Air Bathing Lake situated in Princes Park is available for mixed bathing. The lake is 330 feet in length, with a maximum width of 212 feet. It is filled with filtered sea water and has a water surface area of over 50,000 square feet.

The sea water with which the lake is filled is first stored in settlement tanks so that any suspended matter is deposited. It is then filtered through fine gravel and sand and finally is carefully chlorinated. Before reaching the lake the water is aerated. This process goes on continuously so that all the water in the lake passes through the filters and chlorination apparatus once in every $10\frac{1}{2}$ hours. A proportion of fresh sea water, however, is added daily after filtration and chlorination.

Corridor foot baths have been installed in the floors of the corridors from the dressing cubicles to the Pool, thus ensuring that no bathers enter the water without the feet having been rinsed or washed in running water.

Samples of water, taken at frequent intervals throughout the bathing season, show a very satisfactory degree of purity.

Disinfestation.—During the year 10 infested houses were reported. Of these, seven were Corporation houses, which were dealt with by the Housing Department, and three were privately-owned houses. In the latter cases, disinfestation was carried out by a contractor engaged by the occupiers of the premises.

Schools.—These have been visited regularly by the District Sanitary Inspectors. The standard of cleanliness maintained in the schools has been satisfactory and the importance of frequently and thoroughly cleansing floors, desks, and equipment has been stressed. It is found that the school caretakers are very willing to co-operate in this work of cleansing and disinfection.

During the year extensive drainage work was found to be necessary at three schools. In two of these the old-fashioned trough closets were abolished and substituted by pedestal wash-down water closets; drains were tested, faults repaired, and the sanitary fittings brought into line with modern ideas of sanitation.

Rats and Mice (Destruction) Acts.—The Department is called upon from time to time to give advice on the extermination of rats and mice. Where complaints have been received, the owners and occupiers of property have been very appreciative of the advice given, and have shown a general willingness to carry out the suggestions made by the officers of the Department. In one instance much time and trouble was spent in finding the source of infestation, and with the willing assistance of the owners of the land, a satisfactory clearance of the rats was achieved. In no instance was it necessary to serve a statutory notice under these Acts. Pamphlets explaining the methods of extermination of rats are available on request.

Common Lodging Houses.—There are four registered common lodging houses. They are visited regularly by officers of the Department, and 188 visits were made during the year 1938. The conditions generally are satisfactory.

FACTORIES, WORKSHOPS, WORKPLACES AND HOMEWORK.

1.—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS.

Premises	Number of		
	In- spections	Written Notices	Prose- cutions
FACTORIES (including Factory Laundries)	110	—	None
WORKSHOPS (including Workshop Laundries)	232	—	„
WORKPLACES	2	—	„
TOTALS	344	—	„

2.—DEFECTS FOUND.

PARTICULARS.	Number of Defects.			No. of Prosecutions.	
	Found.	Remedied	Referred to H.M. Inspector		
<i>Nuisances under the Public Health Acts—*</i>					
Want of Cleanliness	11	11	None	None	
Want of Ventilation	—	—	„	„	
Overcrowding	—	—	„	„	
Want of Drainage of Floors	—	—	„	„	
Other Nuisances	—	—	„	„	
†Sanitary Accommodation {	insufficient	—	„	„	
	unsuitable or defective	32	32	„	„
	not separate for sexes	7	7	„	„
<i>Offences under the Factory and Workshop Act</i>					
Illegal Occupation of Underground Bakehouse (S. 101)	None	None	„	„	
Breach of Special Sanitary Requirements for Bakehouses (SS. 97 to 100)	—	—	„	„	
Other Offences	2	2	„	„	
TOTALS	52	52	„	„	

* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act as remediable under the Public Health Acts.

† Section 22 of the Public Health Acts Amendment Act, 1896, has been adopted in Southport. The standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops is in accordance with the Sanitary Accommodation Order of 4th February, 1903.

Part IV.

HOUSING.

HOUSING.

New Houses.—249 new houses were built during the year 1938. All were erected by private enterprise. Figures for each of the past 10 years are given below. They aggregate 3,336, giving an average ‘per annum’ of 334. 17 houses were demolished during the year. These were houses of a very large type, and were replaced by two or more houses of a smaller type on the same sites. The number of inhabited houses according to the Rate Books on 31st December, 1938, was 23,037.

1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
250	310	195	292	447	404	420	384	385	249

Fitness for Habitation.—The standard of fitness of houses in the district is good. Details of work done under the Housing Acts are set out in the table below. In the majority of cases the houses found to have defects were instances of single or minor defects.

Overcrowding.—The majority of the houses found to be overcrowded at the time of the Overcrowding Survey carried out in 1935-36 have become de-crowded as a result of voluntary rehousing by the tenants themselves. Several of these have had the assistance of officials of the Department, and the Housing Manager has co-operated in providing alternative accommodation as suitable Corporation houses have become vacant.

During the year, six cases of overcrowding were relieved. Four of these being families of ten persons or more. One method adopted has been the joining up of two existing houses by a communicating door. These double houses can be re-converted to single dwellings when there is no need for the larger dwelling. The Council are also considering the advisability of erecting houses to relieve the overcrowding of the remaining families.

The situation in regard to overcrowding as on 31st December, 1938, is set out in Part 4 of the table on Housing Statistics appended hereto.

HOUSING STATISTICS.

1. *Inspection of dwelling-houses during the year :*

(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	1,758
	(b)	Number of inspections made for the purpose.....	5,572
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932.....	Nil
	(b)	Number of inspections made for the purpose.....	Nil
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	1,491

2.	<i>Remedy of defects during the year without service of formal notices :</i>	
	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	1,431
3.	<i>Action under statutory powers during the year :</i>	
	A.—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :	
	(1) Number of dwelling-houses in respect of which notices were served requiring repairs	14
	(2) Number of dwelling-houses which were rendered fit after service of formal notices :	
	(a) By owners	12
	(b) By local authority in default of owners	2
	B.—Proceedings under Public Health Acts :	
	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	46
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices :	
	(a) By owners	42
	(b) By local authority in default of owners	4
	C.—Proceedings under sections 11 and 13 of the Housing Act, 1936 :	
	(1) Number of dwelling-houses in respect of which Demolition Orders were made.....	Nil
	(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	Nil
	D.—Proceedings under section 12 of the Housing Act, 1936 :	
	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil

Part IV.—OVERCROWDING.

4.	<i>Housing Act, 1936 :</i>	
	(1) (a) Number of dwellings overcrowded at the end of the year	58
	(b) Number of families dwelling therein	58
	(c) Number of persons dwelling therein	488
	(2) Number of new cases of overcrowding reported during the year	Nil
	(3) (a) Number of cases of overcrowding relieved during the year	6
	(b) Number of persons concerned in such cases	59
	(4) Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil

Part V.

**INSPECTION AND SUPERVISION
OF FOOD.**

SUPERVISION OF FOOD SUPPLIES.

Milk.—There were 132 dairymen (excluding bottled milk purveyors) in the Borough on the 31st December, 1938. Fifty-one of these are cow-keepers, only three of whom are producing milk under licence granted under the Milk (Special Designations) Order, 1936. The following is a list of the different licences in operation under the Order :—

Producer's Licence	Accredited Milk	3
Pasteuriser's Licence	Pasteurised Milk	2
Dealer's Licence	Pasteurised Milk	19
Dealer's Licence	Tuberculin Tested Milk	7
Dealer's Licence	Accredited Milk	1
Supplementary Licence.....	Tuberculin Tested Milk	1
Supplementary Licence.....	Accredited Milk	3
Bottling Licence	Accredited Milk	1

The list shows that an additional pasteuriser's licence has been issued during the year. It is likely that this number will be increased, as another purveyor has been in consultation with officers of the Health Department regarding the installation of a pasteurising plant.

The pasteurised supplies to schools were continued throughout the year. Supervision has been maintained, not only over processing, which is regularly controlled by sampling, but also by medical examination of workers employed on the pasteurising plants.

The efforts of the Department in maintaining a clean milk supply have continued. In addition to the regular sampling of milk and periodical inspection of herds, the practice of subjecting milk to a *sediment test* was continued. For this purpose samples of milk have been taken at various stages in transit from cow to consumer, and the results of the tests have shown a high standard of cleanliness. One-hundred-and-two samples of milk were taken for this type of test, and it was necessary in twenty-three cases to draw the attention of the farmer to the presence of extraneous matter in the milk. Repeat tests showed a marked improvement.

The number of samples of milk taken for *chemical analysis* was 182, and the genuine samples for the year totalled 166. Details of the samples presumed or found to be not genuine are contained in Appendix I of this section of the Report.

The number of samples of milk taken for *bacteriological examination* totalled 154. Of the 154, 76 were taken from producers inside the Borough, of which none was found to be tuberculous, and 78 from producers outside the Borough. Five of the latter were found to be tuberculous. A brief statement of the action taken in each of the five tuberculous samples is given in Appendix II.

Prior to 1st April, 1938, the Department dealt with one case under the *Tuberculosis Order*, 1925, which proved to be tuberculous, but not advanced, on post mortem examination. In this case the amount of compensation paid was £3, being three-fourths of the market value of the animal. The cowshed was thoroughly disinfected after the cow had been removed.

Veterinary Services.—The new scheme of Veterinary Services came into operation on 1st April, 1938. Under this scheme all inspections of cattle are now carried out by Veterinary Inspectors working under the direct instructions of the Ministry of Agriculture and Fisheries. Inspections are duly reported to this Department, and where the Inspector finds an animal suffering from any of the diseases as set out in the Milk and Dairies (Consolidation) Act, 1915, he gives instructions for the animal to be isolated, and informs the farmer that the milk may not be sold for human consumption until the animal has recovered or been slaughtered. On receipt of any such report an Inspector from the Health Department follows up the case by visiting, and satisfying himself that the milk is not being used for human consumption.

The Tuberculosis Order of 1938 imposes upon the Veterinary Inspectors the duties of dealing with any bovine animal which is, or is suspected to be, affected with Tuberculosis.

From the 1st April to the end of the year, 1,635 clinical examinations were made by the Veterinary Inspectors with the following results :—

Bovine animals affected with—

Tuberculosis	4
Mastitis	9
Metritis	2

The four cases of Tuberculosis were slaughtered and destroyed.

WORN-OUT OR DISEASED ANIMALS brought (some at the instance of the Veterinary or Dairy Inspectors) by cattle dealers or farmers in the borough and adjoining districts to be slaughtered for value of salvage, and those dead before arrival were :—

From :	Within the borough	Outside the borough
Tuberculosis	9	14
Accident	6	—
Dropsical	1	2
Jaundice	1	—
Fevered	4	4
Pleurisy	1	1
Peritonitis	—	5
Enteritis	—	2
Pneumonia	2	2
Swine Erysipelas	1	—
Rickets, malnutrition	2	—
	—	—
	27	30
	==	==

Meat.—Supervision and control of meat supplies have been maintained as in former years. The bulk of slaughtering takes place at the Corporation's Abattoir in Hart Street, an arrangement which lends itself to satisfactory control. There is only one private slaughterhouse, and this is visited at the time of slaughtering or immediately after, and the visits during 1938 totalled 297. A summary of the carcasses inspected and condemned during the year is appended to this section of the Report. Details of the parts condemned are shown in the list of Unsound Food Destroyed.

Meat shops are visited regularly for the purpose of examining meat exposed for sale, and no difficulty is experienced by the Inspector. Generally the quality and condition of meat held for sale is remarkably high, and the meat traders of the town willingly co-operate with the Health Department in its work of maintaining a high standard.

Other Foods.—An arrangement is in operation with the City Analyst's Department, Liverpool, for the examination of samples of food taken by this Department. Action in respect of samples presumed not to be genuine is taken immediately, and a record of the work done is reported to the Health Committee once a quarter. The samples of foodstuffs taken for analysis during the year are summarised in convenient form in a table appended hereto. The grand total (excluding milk) was 200, a number which exceeds that of the previous year by 45. Fifty-three samples were found to be adulterated, and 31 materially so. The varieties of foodstuffs sampled during 1938 totalled 65 as compared with 73 in the previous year. Other details relating to samples of food found not to be genuine are given below.

APPENDIX I.

PARTICULARS OF FOOD SAMPLES FOUND TO BE NOT GENUINE.

Four formal samples of milk did not comply with the standards of the Sale of Milk Regulations, 1901. Formal and informal "appeal to cow" samples proved that the cow in each case was giving poor milk. This defect was remedied by action taken by the producer on the advice of the Food Inspector, although in one case it was found necessary for a warning letter to be sent by the Town Clerk.

One formal sample of milk was found to contain 5% added water. The vendor was prosecuted and fined £1 with costs.

OTHER INFORMAL SAMPLES.

Thirty-one samples of eleven different tinned foodstuffs were found to contain tin in amounts varying from 145 to 750 parts of tin per million.

A sample of Galantine of Ham was found to be impregnated with fungus and unfit for human consumption. A sample of vinegar was found to be deficient in acetic acid to the extent of 25%. Three samples of tinned condensed Full Cream Milk, Sweetened, were found to be caramelised by overheating. In all cases, suitable action resulted in the affected stocks being withdrawn from sale.

APPENDIX II.

PARTICULARS OF MILK SAMPLES FOUND TO BE TUBERCULOUS.

(a) Samples taken from Producers Outside the Borough.

CASE No. 1.—The herd which produced the milk from which the original sample was taken consisted of 34 cows in milk and seven dry cows. On the day of the visit to the farm it was found that three cows had been sold on the day the original sample was taken. Four samples were taken, one bulk sample of eight cows, one bulk sample from ten cows, one bulk sample of eight cows, and a further bulk sample of eight cows. All the four samples proved to be negative.

CASE No. 2.—In this case two cows had been sold since the original sample was taken. Eighteen cows were examined and three samples were taken, one individual, one sample from bulk of eight cows, and one bulk sample from nine cows. All three samples were reported negative.

CASE No. 3.—Ten cows were examined. One bulk sample was taken from four cows, and five individual samples were taken. Two of the individual samples proved to be positive, and the Divisional Inspector of the Ministry of Agriculture and Fisheries was notified. The animals were slaughtered under the Tuberculosis Order, 1938. The remaining samples proved to be negative.

CASE No. 4.—In this case the dairy herd consisted of 68 cows in milk. At the time of the visit to the farm there were several dry cows which were not in milk when the original sample was taken. The owner deals extensively in cattle and 15 cows had been sold between the date of the original sample and the visit to the farm. Four bulk samples were taken from 21, 18, 16 and 11 cows respectively and two individual samples were taken. Tubercle bacilli were found in the bulk sample of 18 cows. In consequence of this result a further examination of the animals concerned was carried out by the Veterinary Staff of the Ministry of Agriculture and Fisheries. The remaining samples were negative.

CASE No. 5.—This case was found after the date of the introduction of the new Veterinary Scheme, and the information that tubercle bacilli had been found in the milk was passed on to the Divisional Inspector of the Ministry of Agriculture and Fisheries. Two animals at the farm where the milk was produced were dealt with under the Tuberculosis Order, 1938. A biological examination of samples taken from the remainder of the herd gave negative results.

(b) Samples taken from Producers Inside the Borough.

Tuberculous : Nil.

VISITS OF INSPECTION.

Public Slaughter-houses	609
Private Slaughter-houses	297
Butchers' Shops	2,783
Fish and Poultry Shops	2,292
Other Shops	4,354
Restaurants or Hotel Kitchens (work-places)	168
Ice-cream Workshops	106
Ice-cream Stalls.....	392
Potted Meat and Fish Works	741
Piggeries	51
Cowsheds	156
Milk Farms outside the borough	15
Bacteriological Examination of Milk	154
Private premises where Pigs are killed	7
	<hr/>
	12,125
	<hr/>

UNSOUND FOOD DESTROYED.

Under Magistrate's Order : Nil.

By consent of the Owner or Consignee :—

22 Beasts' Carcases and all organs.	5 tins Plums.
94 „ Lungs (sets)	1 „ Corned Beef.
35 „ Livers.	10 „ Ox Tongue.
25 „ Mesenterys.	19 „ Baked Beans.
4 „ Stomachs.	21 „ Soup.
34 „ Heads and Tongues.	25 „ Peas.
3 „ Spleens.	4 „ Pears.
5 „ Udders.	3 „ Peaches.
9 „ Sets of Offal.	2 „ Pineapple Cubes.
4 „ Hearts.	15 „ Prunes.
1 tin Boiled Beef.	37 „ Condensed Milk.
198lbs. Beef.	4 „ Fruit Salad.
2 Beasts' Skirt.	203 „ Sild.
27 Pigs' Carcases and all organs.	20 bottles Vinegar.
115 „ Heads.	6lbs. Corned Beef.
78 „ Plucks.	5½lbs. Tongue.
27 „ Hearts.	23 tins Ham and Tongue.
58 „ Lungs (sets).	6 „ Brisling.
14 „ Livers.	2 „ Cream.
40 „ Mesenterys.	9 tins Grapefruit.
27 „ Stomachs.	12cwt. Peas.
1 „ Spleen.	18 tins Jellied Veal.
456lbs. Pork.	40 Chips Raspberries.
3lbs. Pigs' Kidneys.	4 tins Boiled Mutton.
2 Beasts' Kidneys.	102lbs. Cake.
1 „ Omentum.	39 gallons Milk.
5 Lambs' Carcases and all organs.	1 tin Oranges.
6 „ Livers.	1 tin Ham and Chicken Roll.
1 Sheep Pluck.	102 Rabbits.
32lbs. Lamb.	1 Pickled Cabbage.
10lbs. Lamb Livers.	1 Jar Mincemeat.
9 Lambs' Hearts.	2 Jars Tomato Juice.
56lbs. Trout.	140 Plaice Fillets.
294lbs. Herrings.	370lbs. Cod Fish.
2 Calves' Carcases and all organs.	224lbs. Soles.
252lbs. White Fish Fillets.	1 Fowl.

CARCASES INSPECTED AND CONDEMNED DURING THE YEAR 1938.

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	1603		592	13863	1096
Number inspected	1603		592	13863	1096
All Diseases except T.B. Whole carcasses con- demned	1	2	—	11	28
Carcases of which some part or organ was con- demned	34	12	—	9	79
Percentage of the num- ber inspected affected with disease other than tuberculosis	3.05		—	1.24	9.76
Tuberculosis only— Whole carcasses con- demned	8	4	1	—	6
Carcases of which some part or organ was con- demned	46	56	—	—	98
Percentage of the num- ber inspected affected with tuberculosis	7.11		0.16	—	9.48

FOOD AND DRUGS ACT.

SUMMARY OF SAMPLES SUBMITTED FOR ANALYSIS.

INFORMAL SAMPLES				Nature of Sample	FORMAL SAMPLES					
Number Taken	Number Genuine	Adulter'd			Number Taken	Number Genuine	Adulter'd		Vendors Cautioned	Prosecutions
		Materially	Trivially or Doubtful				Materially	Trivially or Doubtful		
5	4	1	—	Milk	177	162	15	—	1	1
1	1	—	—	Tinned Cream	—	—	—	—	—	—
—	—	—	—	Butter	15	15	—	—	—	—
—	—	—	—	Cheese	2	2	—	—	—	—
—	—	—	—	Margarine	6	6	—	—	—	—
—	—	—	—	Lard	6	6	—	—	—	—
1	1	—	—	Flour	—	—	—	—	—	—
2	2	—	—	Self Raising Flour	—	—	—	—	—	—
10	10	—	—	Tea	—	—	—	—	—	—
5	5	—	—	Sugar	—	—	—	—	—	—
9	6	3	—	Condensed Milk	—	—	—	—	—	—
1	1	—	—	Potted Ox Tongue Loaf	—	—	—	—	—	—
2	2	—	—	Tinned Apricots	—	—	—	—	—	—
1	1	—	—	„ Apricots & Apple Sauce	—	—	—	—	—	—
1	1	—	—	„ Asparagus	—	—	—	—	—	—
2	—	1	1	„ Baked Beans	—	—	—	—	—	—
1	—	—	1	„ Blackcurrants	—	—	—	—	—	—
1	1	—	—	„ Cherries	—	—	—	—	—	—
2	2	—	—	„ Fruit Salad	—	—	—	—	—	—
1	1	—	—	„ Peaches	—	—	—	—	—	—
4	4	—	—	„ Peas	—	—	—	—	—	—
1	—	1	—	„ Prunes	—	—	—	—	—	—
5	3	—	2	„ Salmon	—	—	—	—	—	—
22	6	7	9	„ Sild	—	—	—	—	—	—
4	2	—	2	„ Soup	—	—	—	—	—	—
4	2	—	2	„ Tomatoes	—	—	—	—	—	—
5	5	—	—	Jam	—	—	—	—	—	—
1	1	—	—	Marmalade	—	—	—	—	—	—
1	1	—	—	Lemon Crystals	—	—	—	—	—	—
1	1	—	—	Potted Chicken	—	—	—	—	—	—
1	1	—	—	Tinned Chicken Broth Soup	—	—	—	—	—	—
3	3	—	—	„ Crab	—	—	—	—	—	—
1	—	1	—	„ Galantine of Ham & Tongue	—	—	—	—	—	—
3	2	—	1	„ Grapefruit	—	—	—	—	—	—
1	1	—	—	„ Lamb Tongues	—	—	—	—	—	—
102	70	14	18	Carried forward	206	191	15	—	1	1

FOOD AND DRUGS ACT. (continued)

SUMMARY OF SAMPLES SUBMITTED FOR ANALYSIS.

INFORMAL SAMPLES				Nature of Sample	FORMAL SAMPLES					
Number Taken.	Number Genuine.	Adulter'd			Number Taken.	Number Genuine.	Adulter'd		Vendors Cautioned.	Prosecutions.
		Materially	Trivially or Doubtful.				Materially	Trivially or Doubtful.		
102	70	14	18	Brought forward	206	191	15	—	1	1
2	2	—	—	Tinned Loganberries	—	—	—	—	—	—
1	1	—	—	„ Pineapple Slices	—	—	—	—	—	—
1	—	—	1	„ Spinach Soup	—	—	—	—	—	—
1	—	1	—	„ Tomato Soup	—	—	—	—	—	—
1	1	—	—	Sauce	—	—	—	—	—	—
3	2	1	—	Vinegar	—	—	—	—	—	—
1	1	—	—	Cocoa	—	—	—	—	—	—
1	1	—	—	Red Currant Jelly	—	—	—	—	—	—
1	1	—	—	Baking Powder	—	—	—	—	—	—
1	1	—	—	Crab Paste	—	—	—	—	—	—
6	6	—	—	Ground Almonds	—	—	—	—	—	—
27	27	—	—	Ice Cream	—	—	—	—	—	—
1	1	—	—	Minced Pickle	—	—	—	—	—	—
1	1	—	—	Olive Oil	—	—	—	—	—	—
1	1	—	—	Rice	—	—	—	—	—	—
—	—	—	—	Sausage	7	7	—	—	—	—
1	1	—	—	Tinned Figs	—	—	—	—	—	—
2	—	—	2	„ Oranges	—	—	—	—	—	—
1	1	—	—	„ Cream	—	—	—	—	—	—
2	2	—	—	Cooking Fat	—	—	—	—	—	—
1	1	—	—	Pepper	—	—	—	—	—	—
3	3	—	—	Dessicated Coconut	—	—	—	—	—	—
1	1	—	—	Ground Cinnamon	—	—	—	—	—	—
1	1	—	—	Ground Nutmeg	—	—	—	—	—	—
1	1	—	—	Lucca Oil	—	—	—	—	—	—
1	1	—	—	Sago	—	—	—	—	—	—
1	1	—	—	Salmon and Anchovy Paste	—	—	—	—	—	—
1	—	—	1	Tinned Brisling	—	—	—	—	—	—
1	1	—	—	„ Chicken and Ham Roll	—	—	—	—	—	—
1	1	—	—	„ Corned Beef	—	—	—	—	—	—
169	131	16	22		213	198	15	—	1	1

Part VI.

**PREVALENCE OF, AND CONTROL OVER,
INFECTIOUS AND OTHER DISEASES.**

INFECTIOUS DISEASES.

Diphtheria.—The greater incidence of this disease which was expected did not take place. During the last three months of the previous year there had been a moderate increase in the number of notifications, and, although 143 cases were notified during 1938 this was less than had been anticipated. The greatest incidence occurred during the first six months of the year, when 101 notifications were received.

In one school 21 cases occurred during this six months period, and it is interesting to note that at this school immunisation was frowned upon by the parents of the children. The presence of the disease in the school combined with an intensive campaign and the support of the teaching staff resulted in a marked increase in the number of children presenting themselves for immunisation.

Apart from this the cases were scattered equally over the borough and the number of notifications during the last six months was low.

With the exception of eight patients all the cases were removed to the Isolation Hospital for treatment. There were four deaths due to this complaint giving a case mortality rate of 3%.

Diphtheria Immunisation.—On May 1st the Health Committee's scheme for the free immunisation of children up to the age of fourteen years was commenced. The scheme is worked by the general practitioners of the town, and their co-operation has been of the greatest value. So much so that during the first twelve months (i.e. up to April 30th, 1939), 1,135 children have received three injections of toxin antitoxin floccules.

It was estimated that before the scheme commenced 8% of the children of school age and under were immunised. This figure has now been estimated at 18%.

In order to avoid the possibility of a serious outbreak of the disease it is necessary to increase the percentage of immunised children to at least 50% or more. It follows, therefore, that this work of immunisation must continue with unabated vigour and it is hoped that the second twelve months of the scheme will show figures comparable, if not better, than those now recorded.

In order to avoid misunderstanding it must be realised that immunity against a particular infection is a relative immunity which is sufficiently complete in well over 90% of immunes to protect against risks of infection with accompanying symptoms of the disease. In a small number this degree of immunity is not so complete, and infection may occur with accompanying symptoms.

Seven children were admitted to the hospital suffering from "sore throat" with a positive throat swab. All these children were said to have been immunised at some time before admission. Four of these children had no membrane in the throat and were obviously not suffering from clinical diphtheria.

Of the remaining three, the facts were as follows :—

- (1) A.M., 3½ years. Only one injection of T.A.F. given a month before contracting the disease. Both tonsils patched—in hospital for five weeks—uninterrupted recovery—amount of serum given, 8,000 units.

- (2) I.B., 8 years. Three injections of T.A.F. The last, four weeks before admission. Both tonsils were coated with membrane. In hospital for four and a half weeks—uninterrupted recovery. Amount of serum given, 16,000 units.
- (3) N.B., 3 years. Three injections of T.A.F., the last, four weeks before admission. Throat clean but some difficulty of breathing and croupy cough. In hospital four weeks—uninterrupted recovery. Amount of serum given, 12,000 units.

Immunity to diphtheria does not follow immediately after the last dose of T.A.F. or other immunising material has been injected. A gradual rise in the degree of immunity takes place over several months and this explains the occasional mild attack which occurs in children who have only recently received their last injection.

Typhoid and Paratyphoid Fever.—One case of paratyphoid B fever was notified during the year. The patient was a man of thirty years of age. Investigation failed to disclose the source of the infection, but it was thought that the disease was contracted during a visit to a town some distance from Southport. The patient was nursed at home.

Dysentery.—Ten cases of bacillary dysentery were notified during January. Three families were involved and a connecting link common to the three could be traced. The bacillus was of the Sonne type, and the course of the illness in each instance was typical, though the cases varied considerably in the intensity of the acute phase. In the main, isolation at home was considered sufficient, but two domestic servants were admitted to the Isolation Hospital.

Scarlet Fever.—208 cases were notified and of these 179 were admitted to hospital for isolation. The incidence of this disease remained the same as during the previous year. The type of infection was mild in the majority of cases, although about 15% of the patients admitted required more prolonged in-patient treatment on account of certain complications arising during the course of their treatment. The complications noted on the case sheets were as follows :—

Anaemia	2	Asthma	1	Impetigo	2
Abscess	2	Septic sores	15	Strabismus	2
Adenitis	20	Rhinorrhoea	4	Cellulitis	1
Serum reaction	27	Jaundice	1	Otorrhoea	10
Tonsillitis	6	Secondary attacks	4		

One death occurred in a boy aged four who was severely ill on admission and died later from toxæmia.

The average length of in-patient treatment was four weeks five days. The percentage of patients who contracted middle ear disease during the course of their illness was 4·8.

Erysipelas.—Forty-two cases were notified and fifteen were treated in the hospital. No deaths were recorded as due to this complaint.

Measles.—A considerable drop in the incidence of this disease was noted. Two hundred and thirty one notifications were received as compared with 1,148 in the preceding year. The cases were scattered over the area and there was no localised outbreak of any intensity. One death occurred.

Whooping Cough.—One hundred and sixty six cases were notified. The disease was of a mild type without serious complications. Two were admitted to the Isolation Hospital because the home circumstances were unsatisfactory.

Cerebro-Spinal Fever, Encephalitis Lethargica, and Acute Anterior Poliomyelitis.—No notifications of persons suffering from the first two diseases were received, but two cases of acute anterior poliomyelitis (“infantile paralysis”) occurred.

INCIDENCE RATE PER 1,000 POPULATION.

	Small-pox.	Scarlet Fever.	Diphtheria.	Enteric.	Erysipelas.	Pneumonia
England and Wales	0·00	2·41	1·58	0·03	0·40	1·10
Southport	—	2·65	1·82	—	0·53	1·04

REMOVAL OF CASES OF INFECTIOUS DISEASE TO THE
ISOLATION HOSPITAL.

The number of cases removed is shown in the table on page 63. No difficulty was experienced in securing adequate isolation. Infectious diseases treated in the borough Infectious Diseases Hospital during 1938 are as follows :—

	Number Treated	Deaths
Scarlet Fever	179	1
Diphtheria	135	4
Bronchitis	—	—
Paratyphoid Fever B	—	—
Erysipelas	15	—
Puerperal Fever	—	—
Measles	8	—
German Measles	—	—
Chicken Pox	3	—
Pneumonia	8	—
Scabies	—	—
Tuberculosis	54	10
Miscellaneous	100	—
Whooping Cough	2	—
Diphtheria Carriers	56	—
Encephalitis Lethargica	—	—
Tuberculous Meningitis	—	2
Mumps	1	—
Puerperal Pyrexia	3	—
	564	17

CASES OF INFECTIOUS DISEASES NOTIFIED during the Year 1938.

Notifiable Disease	Number of cases notified Ages in years							Total cases notified In each ward																
	At all ages	Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 upwards	Central 3,220	Craven 5,220	Hesketh 6,300	Marine 4,510	Park 5,800	Scarisbrick 7,204	South 5,493	Sussex 7,450	Talbot 5,105	West 4,585	Birkdale East 4,990	Birkdale North 2,695	Birkdale South 8,480	Birkdale West 3,667	Ainsdale 3,881	Total No. of Cases removed to Hospital.
Diphtheria	143	—	16	99	11	16	1	—	12	12	17	16	7	4	10	3	14	9	2	5	21	7	4	135
Erysipelas	42	—	—	2	1	14	15	10	3	3	3	4	5	1	3	4	2	—	4	—	3	—	7	15
Scarlet Fever	208	—	41	148	14	5	—	—	8	10	24	8	11	12	14	8	31	11	17	10	33	2	9	179
Puerperal Fever	2	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—
Puerperal Pyrexia	7	—	—	—	1	6	—	—	—	1	—	1	1	—	—	—	1	—	1	1	—	—	1	3
Chicken Pox	318	8	56	224	24	6	—	—	7	21	23	4	24	15	47	4	16	15	19	7	55	46	15	3
Measles	231	5	69	137	17	2	—	1	6	4	9	9	13	12	4	11	13	7	18	6	29	10	80	8
German Measles	20	2	4	8	5	1	—	—	—	1	3	1	2	2	—	—	—	2	2	—	4	1	2	—
Whooping Cough	166	6	71	82	5	2	—	—	4	6	26	7	6	13	9	5	6	4	17	6	48	3	6	2
Ophthalmia Neonatorum	2	2	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—
Pneumonia	82	4	14	9	3	12	15	25	6	6	12	6	2	4	8	9	2	2	2	5	9	3	6	8
Poliomyelitis	2	—	2	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	2
Influenzal Pneumonia	6	—	—	1	—	—	2	3	1	—	1	1	—	—	—	—	—	2	—	—	—	—	1	—
Paratyphoid Fever	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Bacilliary Dysentery	10	—	1	6	—	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	5	5	—	1
	1240	27	274	716	81	69	34	39	47	64	119	57	71	63	96	44	86	52	83	40	209	78	131	356

* Estimated populations based on Registrar-General's figures.

TUBERCULOSIS.
NEW CASES AND MORTALITY DURING 1938.

Age Periods	New Cases				Deaths			
	Pulmonary M.	Non-Pulm'ry F.	Pulmonary M.	Non-Pulm'ry F.	Pulmonary M.	Non-Pulm'ry F.	Pulmonary M.	Non-Pulm'ry F.
0-	—	—	—	—	—	—	—	—
1-	—	—	2	5	—	—	—	1
5-	—	3	7	3	—	—	1	2
15-	3	5	1	4	2	3	—	2
25-	6	7	1	—	3	1	—	—
35-	7	2	—	—	6	1	—	—
45-	7	2	—	1	5	—	1	—
55-	5	—	—	—	1	2	1	—
65 and upwards	3	—	—	—	1	—	—	1
Totals	31	19	11	13	18	7	3	6

The number of new cases of Tuberculosis which came to the notice of the Department during the year was 74.

Of the cases notified, 50 were suffering from Pulmonary Disease. The age and sex of these patients are shown in the table above. The second half of this table gives similar information regarding the persons who died of Tuberculosis during the year.

NON-PULMONARY TUBERCULOSIS.

TUBERCULOSIS OF BONES AND JOINTS.—Two cases were notified and received treatment as follows :—

- (1) Tuberculosis of the Hip. Treated first at the Southport Infirmary and later transferred to the Liverpool Open Air Hospital for Children at Leasowe.
- (2) Tuberculosis of the Ankle. Treated at the Out-patient department of the Southport Infirmary.

TUBERCULOUS PERITONITIS.—Three cases. One treated at the Liverpool Open Air Hospital for Children at Leasowe. One treated at the Southport Infirmary and the other at New Hall Sanatorium.

TUBERCULOUS ADENITIS.—Cervical glands 12, axillary glands 1. The case of axillary adenitis was treated at the Southport Infirmary.

The cases of cervical adenitis received treatment as follows :—

- Four cases treated at the Southport Infirmary.
- Two cases treated at the Tuberculosis Dispensary.
- Two cases treated at the Southport Infirmary and Tuberculosis Dispensary.
- Four cases treated at the Tuberculosis Dispensary and Minor Ailments Clinic.

TUBERCULOUS KIDNEY.—Three notifications. All three cases received their primary treatment at the Southport Infirmary. One case was then under Dispensary supervision and later transferred to New Hall. The second was under treatment at home and the third was later transferred to the Non-pulmonary Sanatorium at Wrightington.

TUBERCULOSIS MENINGITIS.—Two notifications. Both cases were admitted to New Hall Sanatorium and died soon after admission.

TUBERCULOSIS OF SKIN (Lupus).—One notification. This patient attended the Tuberculosis Dispensary and received ultra violet ray treatment.

TUBERCULOSIS DISPENSARY.

Of the 74 new cases notified in the year, 92% were examined at the Dispensary, this being an increase compared with last year. The number of cases on the Dispensary Register at the end of the year was 240, and of this number 124 were found to have sputum containing tubercle bacilli.

CONTACTS.

Persons who had been in contact with cases of Phthisis made 173 attendances at the Contact Clinics, and one case of Pulmonary Tuberculosis with a negative sputum was discovered.

NEW HALL SANATORIUM.

On the 31st December, 1937, there were 24 patients in the Sanatorium, and during 1938, 50 new cases were admitted, making a total of 74. The following table gives details of the admissions and discharges during the year :—

In Sanatorium, 31st December, 1937	Admitted	Discharged	Died	In Sanatorium, 31st December, 1938
24	50	32	10	32

Five patients suffering from Pulmonary Tuberculosis were discharged from the Sanatorium with the disease quiescent, 26 with the disease not quiescent, and 10 advanced cases died. One patient with non-pulmonary tuberculosis was discharged with the disease quiescent.

ARTIFICIAL PNEUMO-THORAX.

Of the 21 cases treated, five are now following their usual occupation, five have improved and one died. There were 12 cases still under treatment at the end of the year, two of these are included in the five who have returned to work.

PHRENIC EVULSION.

The operation of Phrenic Evulsion was performed by Mr. Hugh Reid, the visiting surgeon, in five cases. In all cases the results are satisfactory.

INJECTIONS OF GOLD CHLORIDE.

This treatment has been given to a larger number of patients, 26 received a course of weekly injections and in almost every case the patients' condition was greatly improved. Two patients developed a rash and their treatment was discontinued ; in one case it was recommenced after a short rest.

X-RAY EXAMINATION.

During the year, 324 X-ray examinations were made, 154 being in respect of patients in the Sanatorium, and 170 of patients sent from the Dispensary or the Contact Clinic.

LABORATORY.

The number of sputum specimens examined during the year was 524, of which 240 were found to contain tubercle bacilli.

The average length of in-patient treatment in the Sanatorium was $4\frac{3}{4}$ months.

CARBON ARC AND KROMAYER LAMP.
TUBERCULOSIS.

Disease	Cases	Average length of treatment	Condition on 31st December, 1938
Tuberculous Adenitis	11	$6\frac{1}{2}$ months	4 cured 5 improved 2 no improvement
Lupus	9	11 months	6 improved 3 no improvement *

* The three cases of Lupus with no improvement are as follows :—

- One patient with lupus of leg was transferred for Carbon Dioxide treatment.
- One patient with lupus of face discontinued treatment of his own accord.
- One patient was transferred to Infirmary for change of treatment.

MATERNITY AND CHILD WELFARE.

Disease	Cases	Average length of treatment	Condition on 31st December, 1938
Malnutrition	3	3 months	2 cured 1 improved
Insomnia	5	$2\frac{1}{4}$ months	4 cured 1 improved
Asthma	1	8 months	1 improved
Pinks Disease.....	1	3 months	1 cured
Cervical Adenitis	3	$2\frac{3}{4}$ months	2 cured 1 improved
Rickets	9	3 months	7 cured 2 improved
Anaemia	9	$2\frac{3}{4}$ months	7 cured 1 improved 1 no improvement

CARBON ARC AND KROMAYER LAMP.

SCHOOL MEDICAL CASES.

Disease	Cases	Length of treatment	Condition on 31st December, 1938
Adenitis	11	3½ months	7 cured 4 improved
Osteomyelitis	1	2 months	1 improved
Tuberculous Adenitis	8	5½ months	3 cured 3 improved 2 no improvement
Bronchial Catarrh	5	3 months	5 improved
Debility	9	3⅔ months	7 cured 2 improved
Rheumatism	2	2 months	2 cured
Chorea.....	3	4 months	1 cured 2 improved

SKIN CASES.

Disease	Cases	Length of treatment	Condition on 31st December, 1938
Alopecia	3	5½ months	1 cured 2 improved
Acne Vulgaris	7	3⅓ months	2 cured 4 improved 1 no improvement

TUBERCULOSIS SCHEME.

Return showing the work of the Dispensary during the year 1938.

DIAGNOSIS.	PULMONARY.				NON-PULMONARY.				TOTAL.				GRAND TOTAL.
	Adults.		Children.		Adults.		Children.		Adults.		Children		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
NEW CASES examined during the year (excluding contacts):													
Definitely tuberculous	26	15	—	1	1	5	10	8	27	20	10	9	66
Diagnosis not completed	—	1	—	—	—	—	—	—	—	1	—	—	1
Non-tuberculous	26	39	6	7	—	1	4	2	26	40	10	9	85
CONTACTS examined during the year :—													
Definitely tuberculous	—	—	—	1	—	—	—	—	—	—	—	1	1
Diagnosis not completed	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-tuberculous	—	—	—	—	—	—	—	—	8	19	20	21	68
CASES written off the Dispensary Register as :—													
Recovered	2	1	—	1	3	1	7	3	5	2	7	4	18
Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	34	59	30	30	153
NUMBER OF CASES on Dispensary Register on December 31st :—													
Definitely tuberculous	97	62	—	5	6	22	25	24	103	84	25	29	241
Diagnosis not completed	—	1	—	—	—	—	—	—	—	1	—	—	1
Number of cases on Dispensary Register on January 1st			215		2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years							21	
Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"			21		4. Cases written off during the year as Dead (all causes)							23	
Number of attendances at the Dispensary (including Contacts)			1,329		6. Number of Insured Persons under Domiciliary Treatment on the 31st December							135	
Number of consultations with medical practitioners :— (a) Personal			24		8. Number of visits by Tuberculosis Officers to homes (including personal consultations)							15	
(b) Other.....			220										
Number of visits by Nurses or Health Visitors to homes for Dispensary purposes			5,201		10. Number of :— (a) Specimens of sputum, etc., examined							246	
					(b) X-ray examinations made in connexion with Dispensary work							170	
Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above			—		12. Number of "T.B. plus" cases on Dispensary Register on December 31st							124	

VENEREAL DISEASES.

Report of the Medical Officer in Charge.

At the end of the year 1938, 370 persons were under treatment at the Clinic as compared with 423 at the close of the year 1937.

Thirty-seven patients suffering from syphilis were treated for the first time during the year as compared with 31 in the previous year. Seventy-five patients in their first year of infection with gonorrhoea were treated as compared with 113 in 1937. This figure shows an astonishing reduction. The explanation for this is, as yet, not clear, although improved methods of treatment for this disease may be the principal factor.

A total of 10,705 attendances were made at the out-patient department during the year showing a reduction of 4,192 as compared with the year 1937. This is accounted for by the great success obtained in the use of the latest treatment for gonorrhoea. By this treatment the time taken to obtain a cessation of symptoms has been reduced by at least one third. The treatment is most useful in the early stages of the disease and in such cases complications are becoming almost negligible. It is important, however, that all patients should be kept under observation for a few months so as to ascertain that the cure is complete.

The new cases dealt with during 1938 are classified as follows :—

	Male		Female		Total
Syphilis	16	.....	21	.....	37
Gonorrhoea	55	.....	28	.....	83
Non-venereal diseases	33	.....	44	.....	77
Transferred from other clinics ..	5	.....	9	.....	14
<hr/>					
	109	.....	102	.....	211
<hr/>					

Two cases of ophthalmia neonatorum were admitted during the year, and were discharged completely cured without complications. Here again, with modern treatment, signs and symptoms are cleared up in a few days as compared with four to six weeks intensive treatment by older methods.

Thirteen maternity cases were admitted for in-patient treatment during the year. In ten of these cases the confinement resulted in the birth of healthy babies. Of the remaining three one infant was stillborn and two showed signs of congenital syphilis. Unfortunately in these three instances the mothers presented themselves too late for ante-natal treatment to be of any avail as far as the child was concerned.

During the autumn of the year, three lectures and film displays were given in different parts of the town under the auspices of the Social Hygiene Council. The meetings were well attended and although it has been difficult to prove that these lectures resulted in attendances which could be ascribed to their educational effect, there can be little doubt that this small publicity campaign was of importance to young people in the town. Unfortunately owing to general adverse circumstances, it has been impossible to arrange for further publicity this year, but this aspect of the campaign against venereal disease is so necessary that further efforts along these lines will require consideration in the near future.

VENEREAL DISEASES

RETURN relating to all persons who were treated at the Treatment Centre at Southport during the year ended the 31st Dec., 1938.

	Syphilis		Soft Chancre		Gonorrhoea		Conditions other than Venereal		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals
1. Number of cases on 1st January under treatment or observation	47	118	—	—	175	51	11	21	233	190	423
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection	10	9	—	—	25	3	—	—	35	12	47
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary.....	3	—	—	—	—	—	—	—	3	—	3
„ secondary	4	2	—	—	—	—	—	—	4	2	6
„ latent in 1st year of infection	—	3	—	—	—	—	—	—	—	3	3
„ all later stages	6	9	—	—	—	—	—	—	6	9	15
„ congenital	3	7	—	—	—	—	—	—	3	7	10
Soft Chancre	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection	—	—	—	—	51	24	—	—	51	24	75
Gonorrhoea, later	—	—	—	—	4	4	—	—	4	4	8
Conditions other than venereal	—	—	—	—	—	—	33	44	33	44	77
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection	1	4	—	—	4	5	—	—	5	9	14
TOTALS OF ITEMS 1, 2, 3 AND 4	74	152	—	—	259	87	44	65	377	304	681
5. Number of cases discharged after completion of treatment and final tests of cure (see Item 15).....	5	12	—	—	59	24	34	36	98	72	170
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary.....	—	—	—	—	—	—	—	—	—	—	—
„ secondary	—	—	—	—	—	—	—	—	—	—	—
„ latent in 1st year of infection.....	2	—	—	—	—	—	—	—	2	—	2
„ all later stages	2	7	—	—	—	—	—	—	2	7	9
„ congenital	3	1	—	—	—	—	—	—	3	1	4
Soft Chancre	—	—	—	—	—	—	—	—	—	—	—
Gonorrhoea, 1st year of infection	—	—	—	—	19	8	—	—	19	8	27
Gonorrhoea, later	—	—	—	—	7	3	—	—	7	3	10
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure (see Item 15).....	4	10	—	—	18	2	—	—	22	12	34
8. Number of cases transferred to other Centres or to Institutions, or to care of private practitioners.....	8	12	—	—	25	4	—	6	33	22	55
9. Number of cases remaining under treatment or observation on 31st December	50	110	—	—	131	46	10	23	191	179	370
TOTALS OF ITEMS 5, 6, 7, 8 AND 9	74	152	—	—	259	87	44	65	377	304	681
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary.....	—	—	—	—	—	—	—	—	—	—	—
„ secondary	—	—	—	—	—	—	—	—	—	—	—
„ latent in 1st year of infection	—	—	—	—	—	—	—	—	—	—	—
„ all later stages	—	—	—	—	—	—	—	—	—	—	—
„ congenital	—	1	—	—	—	—	—	—	—	1	1
11. Number of attendances :—											
(a) for individual attention of the medical officers	645	821	—	—	1246	289	64	10	1955	1120	3075
(b) for intermediate treatment, e.g., irrigation, dressing	10	314	—	—	4156	3055	3	92	4169	3461	7630
TOTAL ATTENDANCES	655	1135	—	—	5402	3344	67	102	6124	4581	10705
12. In-patients :—											
(a) Total number of persons admitted for treatment during the year	9	19	—	—	10	20	3	10	22	49	71
(b) Aggregate number of “ in-patient ” days of treatment given.....	43	305	—	—	152	345	31	181	226	831	1057
	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods.....	2	3	—	2	1	1	—	1	3		7

VENEREAL DISEASES.—(Continued.)

14. Chief preparations used in treatment of Syphilis	ARSENICAL		Mercury	Bismuth
	Approved Arseno-benzene Compounds	Others		
	Novarsenobillon, Kharsulphan Silversalvarsen	Triparsamide		
(a) Names of preparations				Bisoxyl
(b) Total number of injections given (out-patients and in-patients).....	652	33	—	490

15. Pathological Work :—	MICROSCOPICAL		Cultural For Gonorrhoea	SERUM		Cerebro-Spinal Fluid	Others for diagnosis of Venereal Disease
	For Syphilis	For Gonorrhoea		For Syphilis	For Gonorrhoea		
(a) Number of specimens examined at and by the medical officer of the Treatment Centre	—	55	—	—	—	—	—
(b) Number of specimens from patients attending at the Centre sent for examination to an approved laboratory.....	—	694	—	361	—	3	5

STATEMENT SHOWING THE SERVICES RENDERED AT THE TREATMENT CENTRE DURING THE YEAR, CLASSIFIED ACCORDING TO THE AREAS IN WHICH THE PATIENTS RESIDED.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales), to be inserted in these headings.	Southport	Lancashire	Wigan	Total
A. Number of cases in Item 3 from each area found to be suffering from :—				
Syphilis	36	1	—	37
Soft Chancre	—	—	—	—
Gonorrhoea	71	10	2	83
Conditions other than Venereal	75	2	—	77
TOTAL	182	13	2	197
B. Total number of attendances of all patients residing in each area	10414	291	—	10705
C. Aggregate number of “ In-patient days ” of all patients residing in each area	687	305	65	1057

(Signed) H. BARDSLEY.
 Medical Officer of the Treatment Centre

BLIND PERSONS' ACT, 1920 and 1938.

On the Register at the 31st December, 1937 157

Removed from the Register during the year :—

3 females left the town
6 females deceased
5 males deceased
1 male removed from Register
(following an operation, his sight improved) 15

142

Added to the Register during the year :—

9 females
12 males 21

163

	Under 16	16—21	22—49	50—69	70 and over	Total
Males	2	5	10	28	31	76
Females	3	4	8	29	43	87
						163

Visits paid by the Home Teacher and Assistant to blind persons in their own homes	3,550
Classes held for instruction	80
Social gatherings held during the winter months	21
Resident in Institutions for the Blind	14

	Males	Females
School for the Blind, Wavertree, Liverpool	1—11 yrs.	
School for the Blind, Hardman Street, Liverpool	1—18 yrs.	
School for the Blind, Hardman Street, Liverpool	1—19 yrs.	
Henshaw's Institution for the Blind, Old Trafford	1—18 yrs.	
The Royal Normal College for the Blind, Upper Norwood, London	1—19 yrs.	1—11 yrs. 1—19 yrs.
Godfrey Ermen Memorial Home, Roe Lane, Southport	1—62 yrs. 1—69 yrs.	1—55 yrs. 1—74 yrs. 1—75 yrs.
The Elms, Pendleton, Manchester		1—78 yrs. 1—80 yrs.

Grants have been made during the year to the amount of £2,400

Persons receiving weekly grants 82

Handicraft classes are held at 44, Hoghton Street every Monday and Tuesday afternoon from 1-30 p.m. until 5-0 p.m. Crafts taught are all the different kinds of basketry, cane, rush and seagrass seating, raffia work, knitting, etc. Braille reading and writing, Moon reading and typewriting are also taught.

HOME WORKERS.—There is one fully qualified pianoforte tuner and repairer, one chair caner and one basket maker in the approved Home Workers' Scheme. There are also two basket makers and numerous tea-agents.

SOCIAL ACTIVITIES.—Socials are held fortnightly, occasionally weekly, during nine months in the year.

The annual outing to Lytham took place on the 22nd July. This was for all the blind people resident in the Borough.

Members of the Handicraft classes had various outings during the year. The members paid their own expenses out of a savings club organised by the Home Teacher.

Eight blind people were given a week's holiday in the Isle of Man at the expense of the Blind Persons' Act Committee. All arrangements were made by the Merseyside Holiday Fund for the Blind.

All Southport blind people have been provided with wireless sets. The Blind Persons' Act Committee have made themselves responsible for the maintenance and upkeep of these sets.

Thanks are due to the Rotary Club for arranging the annual outing, To H, Mr. Cross of the Southport Infirmary, the Transport Department for the free bus passes, and to Miss Mace, a voluntary worker, for the great deal of time she devotes to the blind people of Southport.

Part VII.

PROPAGANDA.

PROPAGANDA.

Apart from the day-to-day efforts of the Department to spread health knowledge, there were three special efforts during the year 1938.

Up to and including the month of March, the National Health Campaign, which had commenced in the previous October, was continued, ending up with intensive advertising on the subject of physical fitness. Southport's part in this campaign, as outlined in last year's Report was continued in the form of lectures, newspaper articles and distribution of material provided by the Central Council for Health Education. On March 28th, a "Keep-Fit Demonstration" was held at the Cambridge Hall. This demonstration was organised by officers of the Health Department in co-operation with the Lancashire Keep-Fit Movement and marked the close of another session of successfully organised keep-fit classes for mothers.

The second of the special efforts referred to was the campaign against venereal diseases, which took place in November. This campaign was organised in conjunction with the British Social Hygiene Council, and its main feature was the holding of three mass meetings in different parts of the town, at which a talk was given and supplemented by the film "Trial for Marriage." In addition, lunch hour talks were arranged at several of the works in the town, and the local Y.M.C.A. co-operated by inviting the youths' organisations to send members to a lecture at the Y.M.C.A. buildings.

Finally, reference must be made to the publicity given to the new Immunisation Scheme which commenced on May 1st. Leaflets were distributed in the schools, as in the past. This method was supplemented by advertisement and articles in the local newspapers, and the response up to November averaged 70 children presenting themselves for immunisation each month. In the first week in December, an extra effort was made. The Editors of the newspapers very kindly agreed to give special prominence to articles on immunisation, and the cinema proprietors of the town consented to show a slide during each performance. These efforts were reflected in the numbers seeking immunisation. For the month of December the number was 150, and that for January, 172.

As in former years, lectures were given by members of the medical staff at the Welfare Centres in the advertised series of lectures, and to various youth organisations in the town. The sound projector belonging to the Department was put to good use on these occasions, and in the majority of instances, the lecture was supported by a film illustrating the main points dealt with in the talk.

LECTURES GIVEN DURING 1938.

Jan. 12th	" School Children "	Dr. W. D. Hood
Jan. 26th	" Meals for School Children "	A demonstration by Miss McLoughlin and Miss Henry
Feb. 9th	" Sex Education of Children "	Dr. H. Bardsley
Feb. 23rd	" Tuberculosis "	Dr. W. E. FitzGerald
March 9th	" Physical Fitness "	Miss K. Evans
Oct. 12th	" The Idea of Health "	Dr. B. M. Butters
Oct. 19th	" The Nutrition Film "	—
Nov. 23rd	" Speech Difficulties in Children "	Miss Joan Pollitt
Dec. 7th	" Care of the Eyes "	Dr. W. E. FitzGerald

CAMPAIGN AGAINST VENEREAL DISEASES.

Nov. 8th	Churchtown Schools	Capt. F. Buckler, M.C.
Nov. 8th	Liverpool Road Centre	Miss Tipper
Nov 9th	Farnborough Road Schools	Capt. F. Buckler, M.C.
Nov. 9th	Y.M.C.A. Buildings	Capt. F. Buckler, M.C.
Nov. 9th	High Park Centre	Miss Tipper
Nov. 9th	Crossens Centre	Miss Tipper
Nov. 10th	Hampton Road Centre	Mrs. S. Neville-Rolfe
Nov. 10th	Temperance Institute	Mrs. S. Neville-Rolfe

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Part VIII.

SCHOOL MEDICAL SERVICE

(The Thirtieth Annual Report of the
School Medical Officer).

EDUCATION COMMITTEE.

The Mayor (Councillor W. Geldard, J.P.).

Councillor A.A. Ashton, J.P. (Chairman).

Councillor F. W. Reddaway (Vice-Chairman).

Alderman C. Aveling, O.B.E., J.P.

Alderman G. H. Hibbott, J.P.

Alderman W. H. M. Mawdsley, J.P.

Alderman A. Tomlinson, J.P.

Councillor T. Ball, J.P.

Councillor P. B. Bayley-Brown.

Councillor P. Carter.

Councillor Dr. H. Coates.

Councillor F. A. Dobbins.

Councillor J. H. Draycott.

Councillor Mrs. Leigh.

Councillor F. Worswick.

Mr. J. E. Marshall.

The Rev. Canon Lancelot, M.A.

Mr. James Hall.

Mrs. Stewart.

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INTRODUCTION.

Briefly stated, the activities of the School Medical Service are as follows :—

I. INSPECTION.

- (i) Routine medical inspection of three groups of Elementary School children.
- (ii) Routine medical inspection of all Higher School children.
- (iii) Special inspection of children of any age.
- (iv) Re-inspection of children found to require further observation.
- (v) Dental inspection of Elementary School children of six years and over.
- (vi) Ascertainment and periodic supervision of all exceptional children.
- (vii) Examination of employees of the Education Committee and candidates for scholarships.
- (viii) Supervision of pupils attending the Junior Instruction Centre.
- (ix) Supervision of schools where infectious disease has occurred.
- (x) Selection of children requiring extra nourishment.
- (xi) Routine cleanliness inspection by Nurses of all school children.

II. TREATMENT.

- (i) Nurses' Daily Treatment Clinic.
- (ii) Minor Ailment Clinic.
- (iii) Nasal Clinic.
- (iv) Skin Clinic.
- (v) Vision Clinic.
- (vi) Aural Clinic.
- (vii) Operative Clinic for removal of Tonsils and Adenoids.
- (viii) Artificial Sunlight Clinic.
- (ix) Dental Clinic.

STAFF.

All members of the staff of the School Medical Service are also concerned with Public Health Duties, the proportion of salary paid by the Education Committee being based on the amount of time devoted to School Medical work. A full list of staff is included in the front of this Report.

CO-ORDINATION.

By the merging of the School Medical and Public Health Services in one Department and the performance of these duties by one staff operating from the Health Centre, complete co-ordination has been effected between the School Medical and allied Public Health Services.

In regard to infant and child welfare, the Birthday scheme inaugurated some years ago with its annual medical inspection of children under five and the transference of essential details to the school record card assures a continuity of medical care from birth to the date of leaving school. The fact that the Health Visitor is also School Nurse for the district which she serves, adds to the efficiency of this continuity of care.

Seven elementary schools take children under five years of age. These children enjoy the normal arrangements for the care of children, and come either under the Infant Welfare Scheme or, where they are attending the nursery classes in the Elementary Schools, the School Medical Service.

All the clinics available for school children are also available for debilitated children discovered at the Welfare Centres. No child fails to receive the advantages of the treatment scheme of the local authority merely because he is not attending school.

SCHOOL HYGIENE.

Of the 19 elementary schools in the Borough, six are owned by the Local Education Authority, the remainder being Church Schools. Five of the six Council Schools are of modern construction. This number will be increased when the Meols Cop Senior School, now in the course of construction, is completed.

Very extensive drainage work was carried out at three of the Church Schools during the year. In two cases the work involved the removal of obsolete trough closets and their replacement by pedestal wash-down water closets.

The sanitary accommodation at the schools is inspected periodically by the Sanitary Inspector. Apart from this, a review of the hygienic condition of schools is made by observations on the part of the Medical Officers of the Department when visiting for the purposes of Routine Medical Inspection, and the reporting of any undesirable features which may be noted. On the whole the hygienic condition of the schools is good.

MEDICAL INSPECTION.

The Board of Education schedule of Medical Inspection has been followed throughout the year.

Routine Medical Inspections continue to be carried out, as in former years, in the case of all entrants and of children who have attained the age of eight years or 12 years since the date of the last Medical Inspection held at the school.

The school population in 1938, was estimated at 7,158, as compared with 7,229 in 1937.

The numbers in each group actually inspected in the two years were :—

	1937	1938
Entrants	837	763
Second age group	866	811
Third age group	678	647
Total	<u>2381</u>	<u>2221</u>

At the time of the routine inspection, Medical Officers also examined 174 children at the request of parents, teachers, or Health Visitors who were dissatisfied with their progress. This is an important part of the school service, as many children are handicapped in their work by small physical defects, which can be put right when the parent is led to understand the cause.

The arrangements for the holding of the inspections, have not been altered since the last Report.

FINDINGS OF MEDICAL INSPECTION.

Clothing and Footwear.—These are examined by the school nurse before the doctor makes the physical examination. There can be no doubt that children’s clothing in general, has undergone a very great change for the better in the last few years. Not only do more of the mothers make great efforts to reach the standard which is aimed at by the school, but the standard itself, is a far healthier one. Amongst the girls particularly, the acceptance of a few light garments as sufficient, is a great advance. In 1938, only 0·2% of those examined were found to have unsatisfactory clothing.

With regard to footwear, there has also been improvement, in recent years, particularly in the amount of interest taken in it by those who are responsible for children. But the school doctor still comes across not a few cases, in which he feels that the treatment he can give for colds, rheumatism, and other ailments, are almost useless in face of the hopeless way in which the child is shod. Voluntary agencies will sometimes come to the rescue, but the speed with which children’s shoes wear out is often too much for their resources.

Vaccination.—73·8% of all the children inspected were found to be unvaccinated. This is the highest figure ever recorded, and the conclusion is inescapable that the introduction of smallpox into a community so unprotected, would have widespread results.

Nutrition.—The question of nutrition, is always in the minds of the School Medical Staff, and is one of the main indices of the success or failure of the work as a whole, looked at from the long view-point.

At routine inspection, the children are weighed and measured as a first step. The assessment of the nutritional state however, is still based mainly on a clinical standard which is bound to vary, at least slightly, with the personnel of the staff.

The Chief Medical Officer of the Board of Education in his last report again mentions the fact that “ The percentages placed in the four categories were again almost identical with those of the two previous years. As was said last year, when it is considered that practically none of the children examined were the same, and that the assessment is made by some 1,300 observers, the coincidence of the proportions in three successive years is amazing.”

This coincidence of results was noted in the last Southport report, and while not quite so striking at the last assessment, there is still a fractional difference only. The numbers who show any sign whatever of under-nutrition, compare favourably with the numbers for England and Wales.

	Southport			England and Wales
	1936	1937	1938	1937
A (excellent)	4·3	4·5	8·1	15·0
B (normal)	88·0	87·8	83·6	73·8
C (slightly sub-normal)	7·5	7·4	8·1	10·6
D (bad)	0·2	0·2	0·2	0·6

Detailed figures for 1938 are given in the accompanying table.

**CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED
DURING THE YEAR IN THE ROUTINE AGE GROUPS.**

Age Groups	Number of Children Inspected	A		B		C (Slightly Sub-normal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants ..	763	48	6·3	657	86·1	56	7·3	2	0·3
Second Age Group	811	68	8·4	680	83·3	61	7·5	2	0·3
Third Age Group	647	62	9·6	523	80·8	62	9·6	—	—
Other Routine Inspections	—	—	—	—	—	—	—	—	—
Total	2221	178	8·1	1860	83·6	179	8·1	4	0·2

Height and Weight.—In a number of previous reports the heights and weights of elementary school children have been compared with those of similar groups at previous periods, with results of some interest,

In the following table, the figures are given for intervals of ten years, since 1911. It shows clearly that although the general trend of both height and weight has been upward, the period of the great war caused a definite set-back in nutrition from which it took years to recover.

Age last birthday.	Southport 1911		Southport 1920		Southport 1929		Southport 1938	
	Height Ins.	Weight Lbs.	Height Ins.	Weight Lbs.	Height Ins.	Weight Lbs.	Height Ins.	Weight Lbs.
Age 5 years :								
Boys	41·0	39·9	42·4	40·8	43·3	42·1	42·6	42·4
Girls	40·6	39·2	41·8	38·8	42·5	40·4	42·3	41·1
Age 8 years :								
Boys	47·0	54·9	48·3	52·2	49·7	56·1	49·4	56·0
Girls	46·6	52·1	47·6	49·7	47·4	53·8	49·6	55·2
Age 12 years :								
Boys	55·0	76·7	55·0	72·0	58·5	78·3	58·6	78·7
Girls	55·7	76·4	56·5	72·0	56·7	79·0	57·9	82·9

Average heights and weights at various ages are shown in Table IX in the appendix.

Sleep.—The question of the amount of sleep which children habitually get in these days is a very important one. Medical Officers who discuss this question with parents of those children who are obviously suffering from shortage of sleep, find for the most part that they are aware of what the child needs but are not prepared to wage the battle required to get it carried out. From this point of view, habit is of the greatest help ; probably the only way of solving the bed-time problem is to establish proper times for going to bed from the earliest age. Many authorities have drawn up tables of sleep at different ages ; the following is an average sample, which could be widely used :—

Age	Amount of Sleep	Bed-time
4 years	12 hours	6-30 p.m.
5—7 years	11—12 hours	7-0 p.m.
8—11 years	10—12 hours	8-0 p.m.
12—14 years	9—10 hours	8—9-0 p.m.

It might be added that when the child has just left school and begun the strain of work, the bed-time is still of great importance but is almost more frequently neglected.

Cleanliness.—The groups of children inspected were, on the whole, cleanly so far as their bodies and clothing were concerned, 0·4% only being unsatisfactory. Head conditions were not so good ; 6·2% of those examined, had nits in the hair, and it is disappointing to find that the older age groups are the greater defaulters in this respect.

It has been conclusively proved that certain families are persistent offenders, and that reinfestation takes place at home, rather than at school. It is therefore necessary for the school nurse to make many visits to certain children, rather than to go over large numbers who are likely to be clean. Many schools, both teachers and children, take great pride in the record for cleanliness, and it is appreciated that the admission of one large and badly cared for family may be very discouraging to their efforts,

The results of cleanliness inspections of all elementary school children, carried out at the end of the year, are detailed on page 000. For comparison, the findings at the Routine Medical Inspection are placed along-side. No school which, at either inspection, falls below the 90% clean mark, should consider the position by any means satisfactory.

SUMMARY OF FINDINGS AT ROUTINE INSPECTION.
(Percentages.)

	Entrants	Second Age group	Third Age group	All groups
	Boys and girls	Boys and girls	Boys and girls	Boys and girls
Uncleanliness (Body)	0·1	0·5	0·6	0·4
Uncleanliness (Head)	5·5	6·3	7·0	6·2
Clothing (unsatisfactory)	0·1	0·2	0·3	0·2
Footgear (unsatisfactory)	0·1	0·4	0·5	0·3
Unvaccinated	—	—	—	73·8
Malnutrition	7·6	7·8	9·9	8·2
Defective Teeth	25·4	27·3	39·4	30·1
Defects of Nose and Throat	15·7	8·9	8·4	11·1
Enlarged Cervical Glands	3·0	3·0	0·9	2·4
Defects of Vision	2·6	10·4	10·0	6·5
Defects of Speech	2·2	0·6	0·3	1·1
Defects of Hearing	2·4	3·9	3·6	2·8
Defects of Circulation	1·0	2·1	3·1	1·8
Defects of Respiration	4·3	1·2	1·5	2·4
Defects of Nervous System	0·4	0·9	0·8	0·7
Skin Disease	3·2	2·2	1·7	2·4
Deformities	2·4	2·3	1·5	2·1

Further details of Findings are given in Table VIII in the Appendix.

Defective teeth are still the most common ailment found amongst a sample of what may be considered the normal school population. The percentage in 1938 showed some improvement on the figure for the previous year, but one cannot escape the conclusion that since facilities for treatment are always available, education of the parents in the need for a healthy mouth, is the main hope for any large scale improvement in this department. This is a matter in which teachers who are in touch with parents can be of great help.

Defects of the nose and throat were also noticed in a large proportion of cases, and these are difficulties which should be tackled early, often even before the child comes to school.

Number found to require Treatment.—Mention has been made in previous reports of the fact that the picture given of the number of children who require treatment is liable to be coloured by the facilities available for that treatment. The following table which compares the defects noted here and in England and Wales 10 years ago with the numbers for 1938, should be read in the light of these remarks. For example, the very ready facilities which there are in an area of this type for treatment of even minor diseases of the skin, is reflected in the high percentage shown as compared with the country as a whole.

Similarly, the hope that it may soon be found possible to institute speech therapy, has aroused interest in speech difficulties, and more of these have come to light than in previous inspections. Further the low figure in the Southport figures for chronic tonsillitis, and the higher than average for “other defects of the nose and throat” are indications of the relatively conservative treatment which is adopted.

Defect	Incidence per 1,000 inspections			
	Southport 1928	Southport 1938	England and Wales 1928	England and Wales 1937
Skin Diseases	21·8	20·3	13·3	9·7
Defects of Vision (Entrant Group not counted)	82·2	72·0	86·8	75·7
Squint	5·6	4·9	8·9	7·9
Other Eye Diseases	12·8	9·0	8·6	6·4
Defects of Hearing	12·3	21·6	4·2	3·0
Otitis Media	—	3·6	5·4	3·9
Chronic Tonsillitis	47·4	24·8	} 63·0	21·5
Adenoids	6·7	6·8		2·8
Adenoids and Chronic Tonsillitis	12·8	9·0		21·3
Other Nose and Throat Defects ...	1·1	21·2	6·4	6·8
Defects of Speech	—	4·1	—	1·3
Organic Heart Disease	6·1	3·2	1·8	1·6
Pulmonary Tuberculosis	—	—	1·4	0·4
Non-Pulmonary Tuberculosis	2·2	—	1·0	0·4
Epilepsy	—	—	} 1·9	0·2
Chorea	—	0·5		0·4
Other Nervous Conditions	—	3·2		1·3
Deformities :—				
Rickets	—	0·9	} 9·0	1·0
Spinal Curvature	6·7	0·5		2·5
Other Forms	4·5	4·1		9·4

PERCENTAGE OF CHILDREN FOUND TO REQUIRE TREATMENT.

Group	Southport 1938	Southport 1937	England and Wales 1937
Entrants	16·1	21·6	16·2
Second Age Group	20·2	24·4	18·2
Third Age Group	24·9	25·4	17·1
Total	19·8	23·7	17·2

Further details of children found to require observation or treatment are given in Table II in the Appendix.

FOLLOWING UP.

Details of arrangements for following up defects and of the school nurses' work were given in the report for 1934 and have not been altered.

CASES FOLLOWED UP.

	At home.		At school.	
	1937	1938	1937	1938
Skin Diseases	248	227	87	45
Ear Conditions	210	155	62	59
Eye Defects	510	404	229	164
Defective Teeth	600	1,086	360	378
Defects of Nose and Throat	769	378	71	70
Other Disease and Defect	1,603	1,585	342	294
Special Cases	—	—	5,305	5,055
	3,940	3,835	6,456	6,065

SUPERVISION FOR CLEANLINESS.

An average of 7·2 visits of inspection per school was paid by the nurses, and at these, 21,153 examinations of children were made (comprising 6,346 first inspections and 14,807 re-inspections of children known to require careful supervision).

26 children were excluded during the year for uncleanness of the head.

School.	Dept.	CONDITION OF ALL CHILDREN IN DECEMBER, 1938.						Con- dition found at R.M.I. Total.
		Boys.			Girls.			
		Nits	Ver- minous	Clean	Nits	Ver- minous	Clean	
	%	%	%	%	%	%	%	%
Ainsdale C.E.	—	—	—	100·0	—	—	100·0	98·3
Ainsdale R.C.	—	—	—	100·0	—	—	100·0	96·0
All Saints' C.E.	Mixed	1·0	—	99·0	15·1	—	84·9	95·6
do.	Infts.	9·1	—	90·9	16·0	—	84·0	71·8
Birkdale Co.	Mixed	1·4	—	98·6	4·3	—	95·7	94·0
do.	Infts.	—	—	100·0	—	—	100·0	100·0
Birkdale Central	—	0·7	—	99·3	3·4	—	96·6	90·3
Churchtown Co.	Mixed	—	—	100·0	—	—	100·0	99·2
do.	Infts.	—	—	100·0	—	—	100·0	100·0
Crossens C.E.	—	—	—	100·0	9·9	—	90·1	93·4
Dean Cooke R.C.	—	—	—	100·0	4·9	—	95·1	100·0
Emmanuel C.E.	—	—	—	100·0	—	—	100·0	100·0
Farnboro' Road Co.	Mixed	—	—	100·0	5·7	—	94·3	91·8
do.	Infts.	—	—	100·0	6·5	—	93·5	94·1
Holy Trinity C.E.	Boys'	0·5	—	99·5	—	—	—	} 93·1
do.	Girls'	—	—	—	8·5	—	91·5	
do.	Infts.	—	—	100·0	9·5	—	90·5	
Linaker Street Co.	Boys'	0·6	—	99·4	—	—	—	98·7
do.	Girls'	—	—	—	4·7	0·3	95·0	93·7
do.	Infts.	0·9	1·7	97·4	1·2	—	98·8	90·8
Norwood Road Co.	Mixed	—	—	100·0	5·2	—	94·8	97·8
do.	Infts.	1·1	—	98·9	3·8	—	96·2	94·7
Our Lady of Lourdes R.C.	—	—	—	100·0	8·8	—	91·2	83·5
St. Marie's R.C.	—	—	—	100·0	11·9	—	88·1	84·1
St. Philip's C.E.	—	—	—	100·0	—	—	100·0	99·0
SS. Simon & Jude	Girls'	—	—	—	5·8	—	94·2	89·1
do.	Infts.	—	—	100·0	6·8	—	93·2	96·8
St. Teresa's R.C.	Mixed	1·1	—	98·9	3·3	—	96·6	81·0
do.	Infts.	—	—	100·0	—	—	100·0	91·7

SUMMARY OF EXAMINATIONS, DECEMBER, 1938.

	Boys		Girls		Total		% 1937
	No.	%	No.	%	No.	%	
Nits	15	0·5	148	4·7	163	2·6	3·1
Verminous	2	0·1	1	0·03	3	0·05	—
Clean	3138	99·4	3042	95·3	6180	97·3	96·6

ARRANGEMENTS FOR TREATMENT.

All clinics are held in the central building at 2, Church Street. An outline of the weekly scheme follows :—

	Morning	Afternoon
Monday.....	Artificial Sunlight—1 nurse	Minor Ailment Clinic—2 medical officers —2 nurses
Tuesday	Ophthalmic Clinic—1 medical officer —1 nurse	Treatment Clinic—1 nurse Treatment Clinic } Nasal Diastolisation } 2 nurses
Wednesday	Artificial Sunlight—1 nurse	Treatment Clinic—2 nurses Ophthalmic Clinic—1 medical officer
Thursday	1 nurse on duty	Skin Clinic—1 dermatologist —2 nurses
Friday	Artificial Sunlight—1 nurse	Treatment Clinic—1 nurse Treatment Clinic } Nasal Diastolisation } 2 nurses
Saturday	Aural Clinic—1 medical officer —1 nurse Treatment Clinic—2 nurses	

Dental Clinics are held daily by either one or two dental surgeons.

A summary of the attendances at these clinics shows the large amount of work, which, year by year, passes through the hands of the medical, dental and nursing staffs.

	1937	1938
Nurses Treatment Clinics	9,552	10,436
Minor Ailment Clinic	4,347	4,865
Skin Clinic	1,556	2,095
Tonsils and Adenoids Clinic	179	169
Ophthalmic Clinic	973	611
Artificial Sunlight Clinic	1,309	2,285
Aural Clinic	275	437
Nasal Clinic	2,684	1,535
Dental Clinic	6,260	6,681
Immunisation Clinic	628	1,008

NURSES' TREATMENT CLINIC.

Until September, this clinic, which deals with all minor ailments requiring dressings or supervision, was held in the morning, as detailed in previous reports.

It had for long been felt both by teachers and by those in charge of the clinic, that, although the treatment was necessary and had done much good, it did lead to considerable loss of school time. The arrangement also impeded the real work of the nurses by attracting those who were only too glad for an excuse to get out of school. Accordingly a conference was held between representatives of the head teachers and the school medical officer and a new programme for an experimental period was agreed to. By this arrangement, only accidents or emergencies, or children requiring special appointments, are dealt with in the morning, other treatment being given in the afternoon. This afternoon clinic works to a time-table ; children absent from school come first and are followed by those in attendance at infant schools, while older children at school come at 3-30 p.m., so that as little school time as possible is lost.

Head teachers have co-operated most valuably in the scheme, and are believed to like it.

The new arrangement was started in September, but of course took a few weeks to get into working order and to be known and understood by the parents.

Although it is never safe to draw conclusions from a short period, it is of interest to compare the attendances during the first three months in which the scheme was acting, with those of the same period in the previous year.

ATTENDANCES AT NURSES' DAILY TREATMENT CLINICS.			
	1937		1938
October	1126	.....	715
November	1218	.....	829
December	912	.....	590
	=====		=====
Total	3256	.....	2134
	=====		=====

Although epidemics and other considerations do affect the attendances as between one year and another, the difference of 1,100 in three months is too striking to be unconnected with the change of scheme. There is on the other hand no reason whatever to suppose the alteration has deprived any child of treatment he or she requires.

MINOR AILMENT CLINIC.

This clinic continues to be held on each Monday afternoon during the school term, but co-incident with other modifications in the time-table an attempt here too, has been made to cut down loss of school attendance, by making sure that only absentees attend early and those at school later in the afternoon. At the same time both here and in the skin clinic, rules were temporarily tightened up with regard to the number of times a child attending for treatment should be seen by the doctor. This was done partly for purposes of ascertainment, and in each case has resulted, for the time being, in slightly increased attendances.

The numbers were as follows :—

	1937		1938
Minor Ailment Clinic	4347	.....	4865
Skin Clinic	1556	.....	2095

SKIN CLINIC.

The Dermatologist continues to see skin cases requiring specialist treatment at this clinic each week, and there can be no doubt that much loss of school attendance is avoided by prompt attention to what may at first look like a trivial condition.

There was an increase in the number of new cases of ringworm over the previous year. The total number of cases is, however, so small that two or more occurring in a family will put the number up considerably.

No child is re-admitted to school after suffering from ringworm or scabies without a doctor's certificate.

	1st Examinations		Re-examinations	
	1937	1938	1937	1938
Ringworm of the Scalp	7	22	21	93
Ringworm of the Body	3	23	4	57
Scabies	50	37	154	76
Other Conditions	661	922	656	861

EYE CLINIC.

Owing to changes in, and temporary shortage of staff, fewer children were examined at this clinic than in the previous year. The number seen was 396, of whom 150 were new cases, and 396 came up for revision of their glasses, or other supervision. Altogether, 611 attendances were made.

Perhaps the most important cases to be discovered early in the school life of the child, are those of severe myopia, and it is reassuring to notice that the number of new cases of this type is decreasing. The probability is that children with hereditary high myopia are for the most part now known to the department. Only eight new cases came to light, compared with 29 in the previous year. On the other hand, 32 children already under treatment came up for supervision, compared with 15 in 1937.

Thirty-eight children attended for treatment of external eye disease. These were all conditions not serious in themselves, but likely to become so if not treated early and with perseverance.

There were 12 new cases of squint found and treated. This is one condition in which the increased attention to toddlers at Welfare Centres is relieving the school service and incidently improving the chance of cure. Whereas it used to be common for parents to delay attention for squint until the child was in school, it is now found that the majority of squinting children enter the infant department already equipped with glasses.

Nine children with severe or complicated defects were sent for advice to the Consultant Ophthalmic Surgeon.

NOSE AND THROAT CLINICS.

(a) TONSIL AND ADENOID CLINIC.

The arrangements for this clinic have continued the same. Cases for examination by the Specialist are only chosen after careful consideration of all aspects of the child's health, and often after several months of observation. As, even then, the question of operation is most carefully considered, it is very seldom indeed that lasting benefit is not obtained from whatever operative procedure is carried out.

In 1938, 150 children were referred to the surgeon for his opinion. He considered that operation was required in 117 cases and in 105 it was performed.

In his report, Mr. Courtney Yorke remarks :—

“ The Chief Medical Officer of the Board of Education once again protests against the excessive number of tonsil and adenoid operations throughout the country. I agree with this point of view and am glad to know that such strictures cannot apply to the Southport Clinic where very conservative methods are in use. No operation is decided upon until I have personally made a careful examination of the child and interviewed the parents. I am especially cautious with regard to the removal of adenoids, because in so many cases, nasal catarrh and obstructed breathing are due to causes other than adenoids, and under such circumstances, operation would fail to relieve the symptoms.

Every precaution is taken to eliminate operation risks. Nitrous Oxide gas is the anaesthetic used and all cases of haemorrhage are promptly detected and treated.

The year's work has been very satisfactory and no untoward results have occurred.

(b) NASAL CLINIC.

Medical officers who work amongst school children cannot but be impressed by the very large number who suffer from catarrhal troubles of the nose, throat, eye and ear. They must also be impressed with the persistence of these complaints and the futility of much of the older treatment. In such cases the re-establishment of an efficient nasal airway and a healthy mucosa must be the aim, and where it is achieved, the general improvement in the patient is remarkable.

Courses of nasal diastolisation were given to 122 children. The course need not be long—the practice here is, two attendances per week for a period of either one or two months, followed by attendance once a week till the result is satisfactory.

Cases of mouth breathing, nasal insufficiency, and nasal catarrh are all improved by the treatment, and benefit is often gained by children who, after removal of adenoids, do not show the improvement that the parents expect.

AURAL CLINIC.

A clinic for treatment of diseases of the ear is held weekly, and acute cases can be seen at shorter intervals.

159 patients attended for the first time and 47 who had attended in other years were also seen. 22 young children suffering from otorrhoea were sent from the Welfare Centres for treatment, and care was taken to see that attendance was continued until the ear was restored to normal. A register of such cases is kept, so that they may not be lost sight of, as it is hoped, by following them up, to prevent the long-standing cases which, in school children, are so difficult to cure.

Of the 137 new school cases in 1938 :—

23	were cases of fairly acute otitis media,
32	„ „ „ long-standing otorrhoea,
27	„ „ „ defective hearing,
55	„ other diseases of the ear including earache, wax in ear, foreign body in ear, etc.

Acute cases of otitis media usually clear up well if treatment is carried out systematically, and in the early stages little is required but repeated and thorough cleansing. Old standing cases are disheartening to both doctor and patient as relapses are very common, but the best results have been obtained here in a long series of cases, by keeping the ear as dry as possible and insufflating iodine and boracic powder thrice weekly till improvement occurs.

Local treatment to the ear is often obviously hopeless unless the general catarrhal condition of the mucous membranes is also considered. In older children, nasal diastolisation is very useful, but in pre-school children it is often impracticable, and there, treatment of the nose by Greswold dyes has been found helpful.

27 new cases of defective hearing, not due to otitis media, were referred to the clinic and received appropriate treatment.

IMMUNISATION CLINIC.

Owing to the introduction of the general practitioner immunisation scheme this clinic was given up during the year, but in the early months, work which had been begun or promised was carried out. In this connection, 135 children were given immunising courses of injections, and 228 had posterior Schick tests performed. The progress of the new immunisation scheme is detailed elsewhere in this report.

ARTIFICIAL SUNLIGHT CLINIC.

Twenty-nine school children were treated by courses of artificial sunlight. There is now no doubt that in suitably chosen cases it is of great value, and that the discredit into which it tended to fall for a few years, was due to the fact that, as often happens with a new form of therapy, it was expected to work miracles even amongst children who showed no definite disability. In this clinic, definitely good results have been obtained at certain stages of chorea, and also in some skin conditions.

DENTAL CLINIC.

During the year 1938, the attendance at the Dental Clinic for treatment, both for the Elementary and Secondary School children, has shown a further increase. The total number of operations being over 13,000.

Ten schools have been inspected, and the number of acceptances has also shown an increase. This is very encouraging. The value of dental treatment has been more appreciated by the parents, 15% more having consented to the treatment of their children.

We are indebted to many Headmasters and Headmistresses for encouraging the children under their care to attend for treatment.

Talks on Dental Hygiene are given to the children at each inspection, and several schools were visited by a Demonstrator from the Dental Board, who gave a series of lectures, from models, on this subject. These proved most

helpful, and the children who attended the clinic after these lectures gave suitable answers to questions put to them about the cleanliness of teeth, etc., showing that the talks had been of value.

Boys and girls who are attending the Junior Instruction Centre are eligible for treatment at all school clinics including the dental clinic. It is found that those who are unemployed shortly after leaving school, come readily for treatment and are usually not in need of a great deal. On the other hand, if a child is in work from 14 to 16 years or so, treatment is not readily available, and much of the school work is undone. It is to be hoped that this gap in the service will later be filled up.

ORTHOPAEDIC AND POSTURAL DEFECTS.

Crippling or severe deformity is relatively uncommon amongst the elementary school children of the district ; only one required residential treatment for a period of time necessitating admission to a hospital school and one was admitted for a shorter period to hospital.

Children requiring operative treatment are sent either to the Southport Infirmary, which has recently established an orthopaedic clinic, or to the Royal Liverpool Children's Hospital.

Postural defects of a simpler type, such as flat foot and scoliosis, are supervised at the school treatment clinic and are notified to the organiser of physical training who teaches special remedial exercises suited to the condition.

HEART DISEASE AND RHEUMATISM.

Children with any form of heart disease are seen regularly at the Monday afternoon clinic and have their activities curtailed according to their need.

Severe cases of rheumatism are not common amongst the school population, but several smouldering infections and several cases of rheumatic carditis were admitted to the Bradstock Lockett Hospital, which was recognised during the year as a special school for such children.

TUBERCULOSIS.

Suspected cases of pulmonary tuberculosis are seen at the Tuberculosis Dispensary, and if observation or treatment on open-air lines is considered necessary, they are admitted to New Hall Sanatorium.

Cases of tuberculosis of bones and joints are becoming rare in the district. During 1938, no notification was received in the case of school children and only two in the case of pre-school children. Indeed, in the last five years, only eight cases have been notified, while in the preceding five years the number was 14.

One child, who was previously on the list, was maintained throughout the year at Leasowe Open-Air Hospital and two others were admitted during the year.

Tuberculosis of glands is more prevalent still than tuberculous bones or joints. In 1938, there were 10 notifications received relating to school children and three to younger children.

INFECTIOUS DISEASE.

Nine deaths from all causes occurred in the 5-15 year age group, i.e., amongst children of the usual school ages. The causes of death are given below, and when it is seen that of the nine, four were due to Diphtheria, the importance of the disease will be brought home.

Causes of death in 5-15 year period for 1938 :—

Diphtheria	4
Non-Pulmonary Tuberculosis ..	1
Organic Heart Disease	1
Violence	1
Other Defined Diseases	2
Total	9

SUMMARY OF NOTIFICATIONS OF INFECTIOUS DISEASE FOR THE
PAST TEN YEARS.
SCHOOL CHILDREN.

	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Measles	402	499	202	231	223	611	58	181	865	92
Rubella	7	8	27	100	13	45	2	67	69	5
Scarlet Fever	115	152	104	68	70	95	32	176	131	127
Chicken Pox	263	155	318	253	171	183	297	286	217	170
Diphtheria	101	113	94	51	22	9	47	6	51	95
Whooping Cough	35	113	142	139	81	66	68	205	56	80
Tuberculosis	14	11	9	9	11	8	7	7	3	15

As will be seen from the summary of notifications, no major school epidemic occurred in 1938. There was an increase in the number of notifications of Diphtheria, and a few cases of very severe type were met with, but the increase over the previous year was less than was expected from the signs of rise at the end of 1937, and in only one school was difficulty found in combating the spread. In that case swabbing of the whole school simultaneously, followed by rigorous exclusion of all carriers for two weeks, brought the trouble to an end. There is no doubt that the daily visiting of absentees saved life by discovering cases, which would otherwise have been missed, and this is sufficient justification for a procedure which does disorganise other work.

EXCLUSION FROM SCHOOL.

The periods of exclusion from school on account of infection have been continued as for the last few years.

The regulations are as follows :—

Disease.	Period of Exclusion of Children suffering from Infectious Disease.	Period of Exclusion of Children living in a house in which there is or has recently been Infectious Disease.
*SCARLET FEVER	5 weeks	(1) For 7 days after the removal of the patient to the Isolation Hospital, and for a further 7 days after the return of the patient from the Hospital, or (2) If the patient is nursed at home, until 7 days after the disinfection of the premises.
DIPHTHERIA	4 weeks	(1) For 7 days after the removal of the patient to the Isolation Hospital or (2) While the patient is being nursed at home.
MEASLES	3 weeks from the appearance of the rash.	All children under 7 years of age and older children who have not had the disease, for 3 weeks from the commencement of the last case.
WHOOPING COUGH	5 weeks.	Children under 7 years of age for 6 weeks from the commencement of the last case.
RUBELLA (German Measles)	10 days.	For 3 weeks from the commencement of the last case.
CHICKEN-POX	3 weeks and till all scabs have disappeared.	Children not themselves suffering must attend school.
MUMPS	3 weeks.	

NOTE.—The above periods of exclusion apply also to teachers, caretakers or other persons attending the school.

*No child is re-admitted after suffering from **Scarlet Fever** or **Diphtheria** till he or she has been passed by the **School Medical Officer**.

SCHOOL CLOSURE

When anything approaching a school epidemic occurs, suggestions as to closure are forthcoming from those who have not closely studied problems of infection. It is well recognised, however, that this does not help to stem the outbreak, for children meet elsewhere and come into even closer contact than they do at school. No closure was, therefore, carried out.

As already mentioned, careful supervision in schools is probably the best means of preventing the spread of infection, and a practice is made of one of the medical officers paying a visit to any department in which notifications indicate the beginning of an epidemic. Nineteen visits were paid for this purpose.

OPEN-AIR EDUCATION.

No open air school or holiday camp is provided for the children, as local conditions of sunshine and fresh air are above the average. Wherever possible in fine weather, classes are held out of doors. In several of the infant schools provision is made for rest out of doors and this is found to be of great benefit to the children.

PHYSICAL TRAINING.

The Organiser of Physical Training reports as follows :—

“ The reorganisation of schools in Southport is gradually making possible the development of physical education on adequate lines. At present there is no gymnasium proper in any elementary school, but in a few months there will probably be four fully equipped gymnasiums with the promise of others in the near future. With the coming of these, the hygienic use of baths and suitable clothing will become the rule. The convenient use of playing fields should also be made possible with the development of central schools. The shape of the town and nature of the soil have made it difficult to provide playing fields within easy access, but this is being remedied to some degree.

“ During 1938, training courses were held for men and women teachers in a fully equipped gymnasium at King George V. School. These courses were very well attended and were from the point of view of enthusiasm and application, probably the most successful ever held here. The teachers realised how necessary it was to have experience in a gymnasium before undertaking work in the gymnasiums now being built. This training experience, together with that obtained in the regular courses held and at Vacation Courses, should prove of great benefit to the teachers of the town.

“ Recently, the Education Committee instituted the provision of rubber-soled shoes for use in Elementary Schools during physical training lessons. This has marked what is probably the most widespread simultaneous improvement in the work throughout the town.

“ Portable gymnastic apparatus has now been supplied to all schools with adequate indoor space.

“ The principle of two lessons per day for infants and one period of physical activity per day for other elementary schools is now established. The swimming and life-saving in the schools is very successful, the main effort being towards teaching large numbers to swim. Later development in swimming is left to the swimming clubs of the town. Practically all senior scholars have a field games period once a week, and inter-school games are played at football, net-ball and hockey.”

PROVISION OF SCHOOL MEALS AND MILK.

(a) MEALS.

According to the local custom, school meals for children considered “ necessitous ” were provided during the winter months only. The meals consisted in every case of two-course dinners, following a varied and well-balanced menu approved by the department. They were provided by several caterers, and before the contract was given each kitchen was inspected by one of the medical officers to ensure that the standard of cleanliness was satisfactory.

In October, a list of children who appear to the head-teachers, health visitors, or medical officers to be in need of extra feeding, is drawn up. These are then weighed and measured, and subsequently a medical officer visits each school, examines the children and makes enquiry generally into possible cases of under-nourishment. Having examined the children, the doctor decides in each case whether meals or milk are required. The parent is then asked to fill up a canteen form. Unfortunately, through ignorance or carelessness, a considerable number of parents do not return these consent forms, and extra nourishment cannot be supplied in these cases ; as they are often borderline cases of malnutrition, a charge of neglect on the parents' part would not be upheld. In November, 1938, 316 children were passed for meals and 287 received them.

For the Winter, 1937-38, canteens were established as follows :—

- Birkdale Council School.
- St. Teresa's R.C. School.
- Linaker Street Council School.
- Mrs. M. A. Dowling (children from St. Marie's R.C. School).
- Churchtown Council School.
- Emmanuel C.E. School.
- SS. Simon and Jude's C.E.
- All Saints' C.E.
- Crossens C.E. School.
- Farnborough Road Council School.
- Holy Trinity C.E. School.
- Our Lady of Lourdes R.C. School.
- Birkdale Central.
- Ainsdale R.C.

The number of individual children receiving meals was ..	281
Total number of meals supplied	22,330
Average cost per meal for food only	5·94d.
Average total cost per meal ..	6·36d.
Total expenditure	£550
Less 50% Government Grant ..	£275
	£275
	which is equivalent to a rate of ·075d.

Summarised particulars relating to the last three years are :—

	1935-6	1936-7	1937-8
Individual children receiving meals	205	186	281
Number of meals supplied	16,978	13,619	22,330
Average cost per meal for food only	6·34d.	4·59d.	5·94d.
Average total cost per meal	6·60d.	4·87d.	6·36d.

(b) MILK.

Pasteurised milk in $\frac{1}{3}$ -pint bottles is supplied in all elementary schools at the cost of $\frac{1}{2}$ d. per bottle.

The pasteurising plants from which the supply comes are situated in the town and are under the close supervision of the department. All new employees of the firms are examined before being taken on to make sure that they are not suffering from any infection or carrier state which might be harmful to the milk.

In January, 1938, on an average, 3,572 children were taking milk, and in December, 1938, the number was 3,596.

Milk is given free to :—

- (i) all children receiving free dinners,
- (ii) children considered slightly undernourished but not eligible for dinners,
- (iii) children who at the end of the issue of free meals are still considered in need of some extra nourishment.

In December, 1938, the number of children receiving free milk only was 156.

All children receiving milk free are weighed and measured twice a year.

CO-OPERATION OF PARENTS, TEACHERS AND WELFARE AGENTS.

By their attendance at the various clinics and at school medical inspection parents are showing greater interest in the children's health. At routine inspection in the elementary schools 65·0% of parents attended, an increase of 3·0% on the previous year. The percentages in the three age groups were as follows :—

	1938
Entrants	79·9
Second Age Group	70·3
Third Age Group	40·8

The number attending the entrants inspection is probably as high as one can expect at a time when many mothers have to go out to work, but there is a falling off at later ages. The presence of the parent at the last inspection is particularly important owing to the opportunity it gives to discuss the suitability of possible forms of employment and it is therefore encouraging to notice that the attendance in this group has gone up by 6% on the figure for last year. The attendance of parents naturally entails a greater expenditure of time and allows of fewer children being examined per session, but it definitely furthers the aim of the service, which is not the compiling of long lists of defects, but that the significance of such defects having been explained to the parents, they should be led to seek and obtain a remedy.

The head teachers render great assistance in the work, both at the time of medical inspection and subsequently in using their influence with parents and children to get treatment carried out.

Arrangements have been made for a representative of the School Medical Department to be present at the meetings of the School Attendance Committee when required. Interchange of information relevant to cases under consideration has thus been made readily available. The School Attendance Officer is notified of children, who, while excluded from school for some contagious condition such as ringworm or scabies, fail to attend regularly for treatment and thus prolong the period of absence. His attention is also directed to any excluded for uncleanness who fail to return cleansed in a reasonable time.

The Liverpool Child Guidance Clinic has undertaken the investigation and supervision of several cases of mal-adjusted children and has rendered very great assistance in each case. Difficulties of the type dealt with by the Clinic require complete and skilled investigation of the whole history and environment of the child. They can be solved only by the team work of specially trained observers and involves the expenditure of much time and patience. The local education authority has resolved to make an annual grant to the clinic. Two cases were referred to the Child Guidance Clinic from the School Clinic.

The Southport Provident Society has given help to numbers of school children recommended to them by the department as in need of clothing, particularly boots and shoes.

Close co-operation is maintained with the local branch of the National Society for the Prevention of Cruelty to Children, whose inspector has helped the department in the supervision of difficult cases. Eighteen cases, involving 45 children, have been dealt with and have required 90 visits to the homes.

For debilitated children coming from poor homes, the North of England Children's Sanatorium has given great help by allocating six beds to Southport children.

EMPLOYMENT OF JUVENILES.

In accordance with Circular 137, reports are now prepared on children of 12 years of age and over who are likely to be unsuitable for special kinds of work. The reports are revised, if necessary, till the child has almost reached school-leaving age, when they are handed on to the Juvenile Employment Committee. A Junior Instruction Centre was opened in January, 1936. The arrangements there were set out in my last report and have remained the same. Physical training plays a large part in the activity of the centre ; and this alone is a great benefit to those who attend.

Routine medical inspection has not been carried out. The population of the centre changes so frequently that it is considered better for the medical officers to keep in touch with the headmaster and see cases as required. All the services of the school clinics are open to those attending the centres.

Frequent visits are paid to the centre by a doctor to see that any case of malnutrition is not overlooked. All children attending are now supplied free with milk and biscuits daily.

DEFECTIVE OR EXCEPTIONAL CHILDREN.

Many of the children suffering from defects affecting their education are known to the staff of the Health Department before they reach school age. Others are referred to the School Medical Officer by the head teacher when they enter school, and a few who appear to be unsuitable to attend school at all, by the Attendance Officer. A summary and classification of all Exceptional Children of school age is given in Table III in the Appendix.

No special school or class is maintained by the Authority ; accommodation for these children has to be found elsewhere, and as it is necessarily residential, the cost is comparatively high. The greatest difficulty, at present is to obtain vacancies for higher grade feeble-minded children.

BLIND AND PARTIALLY-SIGHTED CHILDREN.

There was one child on the blind register in 1938, who was maintained in the Wavertree School for the Blind.

Eighteen partially sighted children were also under observation. Thirteen were cases of high myopia, of whom 11 were being taught with special precautions at elementary schools, one was attending the Braille Classes and was later transferred to the Royal Normal College for the Blind, London, and one was temporarily unfit for school. The remaining five were suffering from congenital aniridia (1), corneal opacity (1), nystagmus (2), and congenital cataract (1).

DEAF CHILDREN.

Two were in the Royal Residential Schools for the Deaf, Manchester. Partially deaf children were supervised at the aural clinic and recommendations for their education were made to the head teacher.

EPILEPTIC CHILDREN.

Six children were known to be suffering from severe epilepsy ; one of these was admitted to a special residential school and one had been at a special school for several years ; one, whose fits occur at night only, was in an elementary school. One other was in an institution for mental defectives, and two were temporarily excused from school during treatment.

DULL OR BACKWARD CHILDREN.

There were 39 children known to be dull or backward attending elementary schools in December, 1938. These children are known to the Department and examined physically and mentally by the medical officers according to the needs of their condition. Twenty-six special examinations were made during the year.

MENTALLY DEFECTIVE—FEEBLE MINDED.

Fourteen educable feeble-minded children were on the register at the end of 1938. The disposal of these children has to be determined individually as there is no local provision for their education. Those who can be expected to benefit by special education to an extent which would enable them to earn a living or be released from supervision at 16 are comparatively few and are just those who appear so nearly normal that the parents are often unwilling

to agree to their going to a residential school. Even when they see the wisdom of this, vacancies are difficult to obtain. On the other hand, such children may hamper the work of an elementary school class and are liable to incur the dislike of normal children. Perhaps the most important point in the care of a feeble-minded child is that before he is lost sight of on leaving school, his case should be reviewed so that if there is any likelihood of trouble arising through the defect, the name may be notified to the mental deficiency authority for supervision, and any further action necessary. This has been the policy adopted recently, and a special effort is made to see every un-notified feeble-minded when he attains 13 years of age.

Of the 14 children mentioned above, seven were at elementary schools, one at a convalescent institution, and six at special schools as follows :—

Dovecot, Knotty Ash, Horticultural Home for Feeble-minded Girls, Lancashire	3
“ Pontville ” R.C. Special School, Ormskirk	2
Mary Dendy Home, Sandlebridge	1

OTHER MENTALLY DEFECTIVE CHILDREN.

Children over seven years of age who are considered ineducable, are notified to the Lancashire Mental Deficiency Acts Committee. Those not in institutions are supervised by the West Lancashire Association for Mental Welfare. They are classified and disposed of as follows :—

	Under Statutory Supervision	In Institutions for Mental Defectives
Feeble-minded	4	1
Imbecile	5	4
Idiot	—	—

TUBERCULOUS AND CRIPPLED CHILDREN.

Arrangements for these are described under treatment of the conditions.

COST OF SPECIAL SCHOOLS FOR YEAR ENDING MARCH, 1938.

Contributions to Schools maintained by other Authorities, Bodies or Persons ...	£1095
Less Income from Parents' Contributions ..	£53
	—————
	£1042
Less 50% Government Grant	£521
	—————
	£521 which is equivalent to a rate of 0·142d.

MEDICAL WORK IN CONNECTION WITH HIGHER SCHOOLS.

The following higher schools are provided by the Council :—

Girls' Secondary School	Average roll 413
Boys' Secondary School	Average roll 539
Technical School :—	
Girls' Department	Average roll 100
Boys' Department	Average roll 50

In the case of Secondary Schools, those who have passed the test for “ special places ” are medically examined and required to have defects treated before the scholarship is actually confirmed. All candidates for the technical school are similarly inspected and are only accepted when medically and dentally fit. Since this latter rule has been enforced, the girls presenting themselves from other areas have shown fewer defects, and the general health standard of the school has gone up. Seventy-nine children were examined for scholarships and 68 for admission to higher schools.

ROUTINE INSPECTION.

The inspection of the secondary schools followed the lines adopted in 1936, viz., full examination of entrants, certain age groups and pupils presented for special reasons, together with a rapid survey of all others.

In the case of the technical school, as the usual course is two years only, complete examination of all those attending is carried out each year, either on entering or in school.

The numbers inspected were as follows :—

	Full Examination	Partial Examination
Girls' Secondary School	234	149
Boys' Secondary School	337	137
Junior Technical School for Girls	45	—

SUMMARY OF FINDINGS AT ROUTINE INSPECTION IN HIGHER SCHOOLS
(PERCENTAGES)

	Boys' Secondary School	Girls' Secondary School	Junior Technical School for Girls	Total
Malnutrition	3.0	3.9	4.4	3.4
Defective Teeth	20.5	14.9	13.3	17.7
Enlarged Tonsils and/or Adenoids	4.6	—	8.9	2.9
Other Conditions of Nose and Throat.....	0.6	1.3	2.2	1.0
Enlarged Cervical Glands	1.3	0.5	—	0.9
Defective Vision	7.8	4.7	2.2	6.2
Defective Hearing	1.5	1.0	2.2	1.3
Defects of Circulation	0.6	2.3	4.4	1.6
Defects of Respiration	1.3	1.0	2.2	1.2
Defects of the Nervous System	0.2	1.6	4.4	1.0
Deformities	2.7	8.9	4.4	5.4
Other Diseases or Defects	1.3	4.4	8.9	3.0

Further details are given in Table XII of the Appendix.

FOLLOWING UP.

Arrangements for following up the defects discovered are the same as for elementary schools.

TREATMENT.

All forms of treatment which are provided for elementary school children are made available when required to children holding scholarships at higher schools. Only under exceptional circumstances are fee-paying children included in the scheme, although the medical officers of the department are ready to give advice in any case in which difficulty arises in connection with school activities.

In 1937 the following attendances were made by higher school pupils at the various clinics :—

Nurses' Clinics	123
Minor Ailments and Skin Clinics :—	
First visits	87
Re-visits	107
Vision Clinic :—	
First visits	53
Re-visits	11
Nose and Throat Clinic :—	
First visits	1
Re-visits	—
Aural Clinic :—	
First visits	2
Re-visits	2
Dental Clinic :—	
Children treated	355
Total	<u>741</u>

PARENTS' PAYMENTS.

The arrangements for payment for treatment for both elementary and secondary school children were detailed in the 1934 report, and have not been altered.

Income from parents' payments for the year ending March, 1938, amounted to £149.

**COST OF SCHOOL MEDICAL SERVICES FOR YEAR ENDING MARCH,
1938.**

Expenditure	£4,774	
Less Income	£149	
	<hr/>	
	£4,625	
Less 50% Government Grant	£2,313	
	<hr/>	
	£2,312	which is equivalent
	<hr/> <hr/>	to a rate of 0·632d.

This does not include the amount of £320 for medical services charged to the Higher Education Account.

HEALTH EDUCATION.

The medical officers of the department gave health talks to several adult audiences, including parents' associations in connection with schools.

MISCELLANEOUS.

Miscellaneous work carried out by medical officers included examination of employees of the Authority for superannuation, issuing of certificates for licences for entertainments, examinations before admission to institutions, scholarship examinations, and for admission to the Technical School. A summary follows :—

	1st visits	Re-visits
Special Tests	190	818
For Scholarships	84	14
For admission to Higher Schools	67	19
For admission to Institutions	14	—
For admission to Training Ship	1	—
Juvenile Court Cases	3	—
Examined regarding Malnutrition	2	2
Examined regarding supplementary feeding	550	517
Examined for Air Force	2	1
Examined for Navy	1	—
	<hr/>	<hr/>
Total	914	1371
	<hr/> <hr/>	<hr/> <hr/>

STATISTICAL TABLES.

TABLE I.

MEDICAL INSPECTIONS OF CHILDREN ATTENDING PUBLIC
ELEMENTARY SCHOOLS.

Year ended 31st December, 1938.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—

Entrants	763
Second Age Group	811
Third Age Group	647
Total	2,221

Number of Other Routine Inspections Nil.

B.—OTHER INSPECTIONS.

Number of Special Inspections	3,852
Number of Re-inspections	3,569
Total	7,421

C.—CHILDREN FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL CHILDREN FOUND AT ROUTINE MEDICAL INSPECTION
TO REQUIRE TREATMENT (EXCLUDING DEFECTS OF NUTRITION, UNCLEANLINESS
AND DENTAL DISEASES).

	For defective Vision (excluding squint)	For all other conditions recorded in Table IIa	Total
Prescribed Groups :—			
Entrants	3	121	124
Second Age Group	47	117	164
Third Age Group	57	94	151
Total (Prescribed Groups)	107	332	439
Other Routine Inspections	—	—	—
Grand Total	107	332	439

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED
DECEMBER, 31ST, 1938.

Defect or Disease	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring treatment requiring	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
(1)	(2)	(3)	(4)	(5)
Skin—				
Ringworm :				
Scalp	—	—	22	—
Body	—	—	23	—
Scabies	—	—	37	—
Impetigo	3	—	125	1
Other Diseases (non-T.B.) ..	42	8	757	39
Eye—				
Blepharitis	4	2	9	—
Conjunctivitis	7	—	27	—
Keratitis	—	—	1	—
Corneal Opacities	—	—	—	—
Other Conditions (excluding Defective Vision and Squint) ..	9	3	48	7
Defective Vision (excluding Squint) ..	107	3	21	16
Squint	11	2	—	—
Ear—				
Defective Hearing	30	4	7	2
Otitis Media	8	1	31	3
Other Ear Diseases	18	2	57	10
Nose and Throat—				
Chronic Tonsillitis only	55	39	55	20
Adenoids only	15	5	3	2
Chronic Tonsillitis and Adenoids ..	20	5	6	4
Other Conditions	47	44	489	64
Enlarged Cervical Glands (non-T.B.) ..	24	29	53	21
Defective Speech	4	20	2	2

TABLE II.—(continued).

Defect or Disease (1)	Routine Inspections		Special Inspections	
	Number of Defects		Number of Defects	
	Requiring treatment (2)	Requiring to be kept under observation but not requiring treatment (3)	Requiring treatment (4)	Requiring to be kept under observation but not requiring treatment (5)
Heart and Circulation—				
Heart Disease :				
Organic	2	13	7	9
Functional	—	2	—	1
Anaemia	15	8	19	1
Lungs—				
Bronchitis	18	12	24	3
Other Non-tuberculous Diseases	9	15	56	16
Tuberculosis—				
Pulmonary :				
Definite	—	—	—	—
Suspected	—	1	1	—
Non-pulmonary :				
Glands	1	—	2	—
Bones and Joints	—	—	—	—
Skin	—	—	1	—
Other Forms	—	1	—	—
Nervous System—				
Epilepsy	—	—	2	1
Chorea	1	1	4	—
Other Conditions	7	6	21	10
Deformities—				
Rickets	2	—	—	—
Spinal Curvature	1	2	1	—
Other Forms	9	32	19	17
Other Diseases and Defects (excluding Uncleanliness and Dental Diseases)	52	33	815	245
Total	515	294	2765	494

TABLE II.—(continued).
B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE
YEAR IN THE ROUTINE AGE GROUPS.

Age Groups	Number of Children Inspected	A (Excellent)		B (Normal)		C (Slightly Subnormal)		D (Bad)	
		No.	%	No.	%	No.	%	No.	%
Entrants	763	48	6.3	657	86.1	56	7.3	2	0.3
Second Age Group	811	68	8.4	680	83.8	61	7.5	2	0.3
Third Age Group	647	62	9.6	523	80.8	62	9.6	—	—
Other Routine Inspections	—	—	—	—	—	—	—	—	—
Total	2221	178	8.1	1860	83.6	179	8.1	4	0.2

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

BLIND CHILDREN.

At Certified Schools for the Blind	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	—	—	—	1

PARTIALLY SIGHTED CHILDREN.

At Certified Schools for the Blind	At Certified Schools for the Partially Sighted	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	—	17	—	1	18

DEAF CHILDREN.

At Certified Schools for the Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
2	—	—	—	2

PARTIALLY DEAF CHILDREN.

At Certified Schools for the Deaf	At Certified Schools for the Partially Deaf	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	—	—	—	—	—

TABLE III.—(continued).

MENTALLY DEFECTIVE CHILDREN.

FEEBLE-MINDED CHILDREN.

(Cases not notifiable to the Local Control Authority).

At Certified Schools for Mentally Defective Children	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
6	7	1	—	14

EPILEPTIC CHILDREN.

CHILDREN SUFFERING FROM SEVERE EPILEPSY.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
2	1	1	2	6

PHYSICALLY DEFECTIVE CHILDREN.

A.—TUBERCULOUS CHILDREN.

I.—CHILDREN SUFFERING FROM PULMONARY TUBERCULOSIS,
(Including pleura and intra-thoracic glands).

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	—	—	—	—

II.—CHILDREN SUFFERING FROM NON-PULMONARY TUBERCULOSIS.

(This category includes tuberculosis of all sites other than those shown in (I.) above).

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
3	14	1	1	19

TABLE III.—(continued).

B.—DELICATE CHILDREN.

i.e., children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open-air School.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	18	1	4	24

C.—CRIPPLED CHILDREN.

Children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
1	14	—	1	16

D.—CHILDREN WITH HEART DISEASE.

Children whose defect is so severe as to necessitate the provision of educational facilities other than those of the Public Elementary School.

At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
—	4	—	—	4

CHILDREN SUFFERING FROM MULTIPLE DEFECTS.

i.e., any combination of the following types of defect :—Total Blindness, Total Deafness, Mental Defect (Feeble-minded), Severe Epilepsy, Active Tuberculosis, Crippling (as defined in Section C above), Heart Disease.

Combination of Defect	At Certified Special Schools	At Public Elementary Schools	At other Institutions	At no School or Institution	Total
Feeble minded—Epileptic	—	1	—	—	1

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER,
1938.

TREATMENT TABLE.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE VI).

Disease or Defect (1)	Number of defects treated, or under treatment during the year		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
SKIN—			
Ringworm—Scalp :			
(i) X-ray Treatment	—	—	—
(ii) Other Treatment	21	—	21
Ringworm—Body	24	—	24
Scabies	37	—	37
Impetigo	108	—	108
Other Skin Disease	613	—	613
MINOR EYE DEFECTS	81	—	81
(External and other, but excluding cases falling in Group II.).			
MINOR EAR DEFECTS	59	—	59
MISCELLANEOUS	1,757	8	1,765
(e.g., minor injuries, bruises, sores, chilblains, etc.).			
Total	2,700	8	2,708

TABLE IV.—(continued).

GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS
TREATED AS MINOR AILMENTS—GROUP I.).

Defect or Disease (1)	Number of Defects dealt with		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
Errors of Refraction (including Squint)	550	3	553
Other Defect or Disease of the Eyes (excluding those recorded in Group I.).	90	1	91
Total	640	4	644

NO. OF CHILDREN FOR WHOM SPECTACLES WERE :—

Prescribed (1)		Obtained (2)	
(i) Under the Authority's Scheme	(ii) Otherwise	(i) Under the Authority's Scheme	(ii) Otherwise
180	3	135	3

TABLE IV.—(continued).

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

NUMBER OF DEFECTS.

Received Operative Treatment												Received other forms of treatment (4)	Total number treated (5)
Under the Authority's Scheme, in Clinic or Hospital (1)				By Private practitioner or hospital, apart from the Authority's Scheme (2)				Total (3)					
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)		
65	16	24	—	4	—	1	—	69	16	25	—	122	232

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and Adenoids. (iv) Other defects of Nose and Throat.

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme			Otherwise			Total number treated
	Residential treatment with education	Residential treatment without education	Non- Residential treatment at an orthopaedic clinic	Residential treatment with education	Residential treatment without education	Non- Residential treatment at an orthopaedic clinic	
No. of children treated	1	1	10	1	1	2	16

TABLE V.

DENTAL INSPECTION AND TREATMENT.

(1) Number of children inspected by the Dentist :—

Aged :		5	—	Total	3,079
(a) Routine Age Groups		6	.....	494	
		7	.....	457	
		8	.....	400	
		9	.....	399	
		10	.....	412	
		11	.....	344	
		12	.....	266	
		13	.....	243	
		14	.....	64	
	(b) Specials .....						1,749
(c) TOTAL (Routine and Specials).....						4,828
(2) Found to require treatment						4,233
(3) Actually treated						3,410
(4) Attendances made by children for treatment						8,028
(5) Half-days devoted to	Inspection		26	Total	818
	Treatment		.....	792	
(6) Fillings	Permanent Teeth		3,152	Total	3,216
	Temporary Teeth		.....	64	
(7) Extractions	Permanent Teeth		1,726	Total	7,855
	Temporary Teeth		.....	6,129	
(8) Admissions of general anaesthetics for extractions						Nil.
(9) Other operations	Permanent Teeth		591	Total	2,139
	Temporary Teeth		.....	1,548	

TABLE VI.

UNCLEANLINESS AND VERMINOUS CONDITION.

(i)	Average number of visits per school made during the year by the School Nurses :—	7·2
(ii)	Total number of examinations of children in the schools by School Nurses :—	21,153
(iii)	Number of individual children found unclean :—	166
(iv)	Number of children cleansed under arrangements made by the Local Education Authority :—	Nil.
<p>No cleansing station is provided, but means are available as required. Instructions are given to the parents, and if necessary, action is taken under the School Attendance Bye-Laws.</p>		
(v)	Number of cases in which legal proceedings were taken :—	
	(a) Under the Education Act, 1921	Nil.
	(b) Under School Attendance Bye-Laws	Nil.

TABLE VII.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE
YEAR ENDED 31st DECEMBER, 1938, BY THE LOCAL EDUCATION
AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total number of children notified ONE.

ANALYSIS OF THE ABOVE TOTAL.

	Diagnosis	Boys	Girls
1	(i) Children incapable of receiving benefit or further benefit from instruction in a special school : (a) Idiots (b) Imbeciles (c) Others (ii) Children unable to be instructed in a special School without detriment to the interests of other children : (a) Moral defectives (b) Others	 — 1 — — — —	 — — — — — —
2	Feeble-minded children notified on leaving a special School on or before attaining the age of 16	—	—
3	Feeble-minded children notified under Article 3 of the 1928 Regulations, i.e., “special circumstances” cases	—	—
4	Children, who in addition to being mentally defective, were blind or deaf	—	—
	Grand Total	1	—

TABLE VIII.—ELEMENTARY SCHOOLS. FINDINGS AT ROUTINE MEDICAL INSPECTION.

	ENTRANTS		INTERMEDIATES		LEAVERS		TOTAL	
	No.	%	No.	%	No.	%	No.	%
Listed for Inspection	—	—	—	—	—	—	2668	—
Absent from Inspection	—	—	—	—	—	—	412	15.4
Parent refused Inspection	9	—	13	—	13	—	35	1.3
Actually Inspected	763	—	811	—	647	—	2221	83.3
Parent or Guardian present	610	79.9	570	70.3	264	40.8	1444	65.0
Unvaccinated	—	—	—	—	—	—	1638	73.8
Unsatisfactory Clothing	1	0.1	2	0.2	2	0.3	5	0.2
Unsatisfactory Footgear	1	0.1	3	0.4	3	0.5	7	0.3
Malnutrition	58	7.6	63	7.8	62	9.9	183	8.2
Nits in the Hair	42	5.5	51	6.3	45	7.0	138	6.2
Verminous Hair	—	—	—	—	—	—	—	—
Verminous Clothing	—	—	—	—	—	—	—	—
Bodies Dirty	1	0.1	4	0.5	4	0.6	9	0.4
Defective Teeth	194	25.4	221	27.3	255	39.4	670	30.1
Nose { Enlarged Tonsils or and { Adenoids	80	10.5	38	4.7	38	5.8	156	70.2
Throat { Other conditions	40	5.2	34	4.2	17	2.6	91	4.1
Glands in the Neck	23	3.0	24	3.0	6	0.9	53	2.4
Eye { External Eye Disease	10	1.3	6	0.7	9	1.4	25	1.1
	5	0.7	46	5.7	55	8.5	106	4.8
Ear { Defective Vision	5	0.7	7	0.9	1	0.2	13	0.6
	5	0.7	14	1.7	14	2.2	34	1.6
Ear { Defective Hearing	6	0.8	8	1.0	9	1.4	29	1.3
	12	1.6	5	0.6	2	0.3	24	1.1
Speech Defects	17	2.2	5	0.6	8	1.2	17	0.8
Heart and { Cardiac Disease	4	0.5	5	0.6	12	1.9	23	1.0
Circulation { Anaemia	4	0.5	7	0.9	10	1.5	53	2.4
Lung Disease	33	4.3	10	1.2	5	0.8	15	0.7
Nervous Disease	3	0.4	7	0.9	—	—	2	0.1
Tuberculosis	1	0.1	1	0.1	—	—	2	0.1
Rickets	1	0.1	—	—	1	0.2	2	0.1
Deformities	17	2.2	19	2.3	9	1.4	45	2.0
Skin Disease	24	3.2	18	2.2	11	1.7	53	2.4
Other Disease or Defect	32	4.2	26	3.2	27	4.2	85	3.8

TABLE IX.—ELEMENTARY SCHOOLS.

AVERAGE HEIGHTS AND WEIGHTS (Age last birthday).

BOYS.					GIRLS.				
1929									
Number Inspected	Age last birthday	Ft.	In.	St. Lbs.	Number Inspected	Age last birthday	Ft.	In.	St. Lbs.
35	3	3—	1-5	2— 6-5	28	3	3—	1-6	2— 5-1
93	4	3—	4-6	2— 10-6	87	4	3—	4-3	2— 7-5
195	5	3—	7-3	3— 0-1	181	5	3—	6-5	2— 12-4
111	6	3—	9-0	3— 3-9	122	6	3—	8-7	3— 2-1
53	7	3—	11-2	3— 8-8	44	7	3—	11-5	3— 8-7
409	8	4—	1-7	4— 0-1	386	8	3—	11-4	3— 11-8
105	9	4—	3-4	4— 10-6	107	9	4—	2-6	4— 1-7
22	10	4—	6-6	4— 11-4	22	10	4—	4-1	4— 6-2
25	11	4—	7-6	5— 4-0	12	11	4—	6-2	4— 13-4
251	12	4—	10-5	5— 8-3	254	12	4—	8-7	5— 9-0
88	13	4—	10-5	6— 1-2	55	13	4—	10-9	7— 3-0
33	14	5—	0-0	6— 10-4	4	14	4—	9-4	6— 5-1
9	15	5—	2-9	7— 6-8					
2	16	5—	3-3	8— 1-5					
1431					1302				
BOYS.					GIRLS.				
1938									
Number Inspected	Age last birthday	Ft.	In.	St. Lbs.	Number Inspected	Age last birthday	Ft.	In.	St. Lbs.
32	3	3—	1-7	2— 7-8	33	3	2—	10-3	2— 6-9
88	4	3—	4-6	2— 11-3	80	4	3—	4-0	2— 9-1
171	5	3—	6-6	3— 0-4	175	5	3—	6-3	2— 13-2
64	6	3—	8-7	3— 3-8	60	6	3—	8-9	3— 4-1
28	7	3—	10-5	3— 9-9	37	7	3—	10-9	3— 7-4
281	8	4—	1-4	4— 0-0	291	8	4—	1-6	3— 13-2
554	9	4—	3-4	4— 4-7	50	9	4—	3-6	4— 6-4
23	10	4—	4-6	4— 9-0	24	10	4—	5-4	4— 12-3
41	11	4—	5-2	5— 3-3	22	11	4—	7-7	5— 3-7
287	12	4—	10-6	5— 8-7	251	12	4—	9-9	5— 12-9
71	13	4—	11-7	6— 6-5	37	13	4—	11-7	6— 8-5
15	14	5—	1-0	6— 10-0	2	14	5—	3-0	7— 7-8
4	15	5—	3-3	7— 8-5					
1159					1062				

TABLE X.—DENTAL SURGEON'S REPORT. ELEMENTARY SCHOOLS.

Month	Results of Inspection			Ap- point- ments	Special Inspections		Extractions		Local Anaesthetic		Fillings		Dress- ings	Scal- ings	Root Treat- ment	Teeth Extracted for Regulation Purposes		Oral Affec- tions	Consultation with Parent	Examination Treat- ment Deferred	No. of Treatments			
					No. Inspected	No. found to require Treatment	Temp.	Perm.	Temp.	Perm.	Temp.	Perm.				Routine					Specials			
	Schools Visited	Children Examined	Children needing Treatment													New	Re- visits				New	Re- visits		
January	1	78	73	442	90	90	321	78	315	5	176	114	12	16	48	5	11	27	107	353	149	90	42	
February	1	215	211	616	44	44	467	147	491	8	249	220	11	18	50	18	13	34	92	222	186	44	17	
March	2	551	471	677	234	233	671	182	605	9	314	207	8	43	64	7	10	31	95	203	218	233	157	
April	1	231	207	389	176	157	242	86	264	6	174	147	7	14	43	5	5	16	157	35	80	157	232	
May	—	—	—	659	190	178	515	184	555	8	277	160	5	34	70	11	9	21	105	139	128	178	284	
June	1	515	403	554	116	108	678	119	610	4	159	147	6	24	59	5	6	26	102	185	100	108	241	
July	1	230	209	439	107	107	493	112	432	7	105	110	7	9	46	5	3	26	66	103	124	107	164	
August	—	—	—	132	39	38	87	20	89	2	34	27	2	7	18	—	2	10	44	—	18	38	98	
September	3	703	554	555	148	147	633	115	575	8	189	128	6	11	55	8	5	45	103	138	109	147	247	
October	1	578	478	508	86	83	473	124	466	2	199	94	4	18	67	5	4	28	69	133	144	83	191	
November	1	376	333	567	85	84	441	138	469	2	248	128	4	24	53	5	14	30	59	119	230	84	175	
December	1	775	590	365	79	78	466	83	391	3	115	66	2	12	29	5	4	20	59	122	144	78	104	
TOTALS	10	3081	2575	5903	1394	1347	5487	1388	5262	64	2239	1548	74	230	602	79	86	314	1058	1752	1630	1347	1952	

TABLE XI.—SECONDARY SCHOOLS.

AVERAGE HEIGHTS AND WEIGHTS (Age last birthday).

BOYS' SECONDARY SCHOOL.

Number Inspected	Age last birthday	Ft.	In.	St.	Lbs.
5	9	4—	3·6	4—	2·7
17	10	4—	6·2	4—	12·1
42	11	4—	8·4	5—	5·3
75	12	4—	7·0	5—	12·2
77	13	4—	11·6	6—	6·1
92	14	5—	2·5	7—	7·1
87	15	5—	5·8	8—	7·7
43	16	5—	6·3	8—	8·7
23	17	5—	7·7	9—	6·6
11	18	5—	7·6	9—	5·9
2	19	5—	8·9	10—	0·0
474					

GIRLS' SECONDARY SCHOOL.

Number Inspected	Age last birthday	Ft.	In.	St.	Lbs.
4	9	4—	6·4	5—	0·4
18	10	4—	8·9	5—	3·4
33	11	4—	9·9	5—	10·1
73	12	5—	0·1	6—	8·6
73	13	5—	2·2	7—	3·6
68	14	5—	4·8	7—	13·9
73	15	5—	3·6	8—	2·4
23	16	5—	3·6	8—	6·3
15	17	5—	5·5	8—	4·9
2	18	5—	3·8	8—	6·6
383					

DAY TECHNICAL—GIRLS'.

Number Inspected	Age last birthday	Ft.	In.	St.	Lbs.
9	14	5—	2·8	8—	1·2
34	15	5—	2·6	7—	13·8
2	16	5—	3·8	7—	12·3
45					

TABLE XII.—SECONDARY SCHOOLS.
FINDINGS AT ROUTINE MEDICAL INSPECTION.

		Boys' Secondary School		Girls' Secondary School		Junior Technical Girls' Dept.		Grand Total.	
		No.	%	No.	%	No.	%	No.	%
Diseases and Defects	Listed for Inspection	491	—	386	—	46	—	923	—
	{ Absent from Inspection	17	3.5	3	0.8	1	2.2	21	2.3
	{ Parent refused Inspection	—	—	—	—	—	—	—	—
	{ Actually Inspected	474	96.5	383	99.2	45	97.8	902	97.7
	Parent or Guardian Present	53	11.2	195	50.9	17	37.8	265	29.4
	{ Malnutrition	14	2.9	15	3.9	2	4.4	31	3.4
	{ Hair { Nits in the Hair	—	—	4	1.0	—	—	4	0.4
	{ and { Verminous Hair	—	—	—	—	—	—	—	—
	{ Body { Do. Clothing	—	—	—	—	—	—	—	—
	{ Dirty Bodies	—	—	—	—	—	—	—	—
	Defective Teeth	97	20.5	57	14.6	6	13.3	160	17.7
	{ Nose { Enlarged Tonsils or	21	4.4	—	—	4	8.9	25	2.8
	{ and { Adenoids	3	0.6	5	1.3	1	2.2	9	1.0
	Throat { Other Conditions	6	1.3	2	0.5	—	—	8	0.9
	Glands in the Neck	12	2.5	4	1.0	—	—	16	1.8
	{ Eye { External Eye Disease	37	7.8	18	4.7	1	2.2	56	6.2
	{ Defective Vision	1	0.2	—	—	—	—	1	0.1
	{ Squint	5	1.1	11	2.9	—	—	16	1.8
	{ Ear { Ear Disease	7	1.5	4	1.0	1	2.2	12	1.3
	{ Defective Hearing	2	0.4	—	—	—	—	2	0.2
	Speech Defects	3	0.6	6	1.6	1	2.2	10	1.1
	Heart and { Cardiac Disease	—	—	3	0.8	1	2.2	4	0.4
	Circulation { Anaemia	6	1.3	4	1.0	1	2.2	11	1.2
	Lung Disease	1	0.2	6	1.6	2	4.4	9	1.0
	Nervous Disease	—	—	—	—	—	—	—	—
	Tuberculosis	—	—	—	—	—	—	—	—
	Rickets	13	2.7	34	8.9	2	4.4	49	5.4
	Deformities	8	1.7	7	1.8	4	8.9	19	2.1
	Skin Disease	6	1.3	17	4.4	4	8.9	27	3.0
	Other Disease or Defect								

TABLE XIII.—SCHOOL DENTAL SURGEON'S REPORT.

SECONDARY SCHOOLS.

Month	Ap- point- ments	Inspections		Extractions		Local Anaesthetic	Fillings		Dress- ings	Seal- ings	Root Treat- ment	Teeth Extracted for Regulation Purposes		Oral Affec- tions	Consultation with Parent	Examined, Treatment Deferred	No. of Treatments	
		Number Inspected	No. found to require Treatment	Temp.	Perm.		Temp.	Perm.				New	Re- visits					
January	122	92	68	1	17	20	—	96	1	5	7	—	2	4	4	45	68	48
February	67	30	28	—	8	7	—	58	—	4	3	—	1	2	3	26	28	40
March	81	24	24	1	13	12	—	44	—	8	14	—	—	1	1	30	24	57
April	112	51	41	4	20	24	—	80	5	3	16	—	2	1	—	72	41	104
May	119	31	30	1	26	28	—	113	1	4	11	—	2	4	1	37	30	120
June	79	4	3	—	16	16	—	67	1	2	10	—	—	—	—	11	3	68
July	70	21	20	10	12	18	—	31	—	2	5	—	—	7	—	29	20	64
August	69	11	11	7	7	17	—	63	—	—	5	2	—	3	4	24	11	66
September	104	22	22	4	22	26	—	83	—	—	4	1	1	6	5	41	22	112
October	117	28	26	3	40	47	—	78	5	—	14	1	3	1	5	24	26	109
November	147	19	16	2	41	39	—	120	1	2	10	2	1	5	3	34	16	146
December	107	22	22	1	24	24	—	80	2	4	13	—	1	1	2	45	22	102
TOTALS	1194	355	311	34	246	278	—	913	16	34	112	6	13	35	28	418	311	1036

During the year, 176 half-days were devoted to Dental Treatment of Secondary School Children. 1,391 attendances were made at the Clinic by 355 individual children.

